Overview of Community Hospitals

Community Hospitals provide medical services for patients who require a short period of continuation of care, usually after their discharge from the acute hospitals. The types of care at the community hospitals include medical, nursing and rehabilitation care.

During your stay at the Community Hospital, the healthcare staff will work with you to assist you in regaining certain levels of your physical functions, so that you can return home faster and resume your daily activities as much as possible.

The healthcare staff in the Community Hospitals usually work in teams and they include doctors, nurses, rehabilitation therapists, medical social workers, and pharmacists, amongst others. They are well-trained to care for older adults, as well as patients who require rehabilitation for functional recovery, and continuation of intermediate level medical and nursing care.

Overall, the environment and facilities at the Community Hospitals are developed to help you in your recovery process. The facilities include rehabilitation gyms, therapy areas, inpatient beds, and mock-up HDB rooms (in some community hospitals).

If you are medically suitable for transfer to a Community Hospital for care, you will be advised by your medical team during your inpatient stay in the acute hospital.
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Chapter 1: Introduction to Community Hospitals’ Services

There are currently 7 Community Hospitals in operation, listed below:

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<th>Name of Community Hospital</th>
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<td>1. Ang Mo Kio - Thye Hua Kwan Hospital</td>
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<tr>
<td>2. Bright Vision Hospital</td>
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<tr>
<td>3. Jurong Community Hospital</td>
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<tr>
<td>4. Ren Ci Community Hospital</td>
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<tr>
<td>5. St Andrew’s Community Hospital</td>
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<tr>
<td>6. St Luke’s Hospital</td>
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<tr>
<td>7. Yishun Community Hospital</td>
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</table>

The map below presents the location of the Community Hospitals.

Appendix A provides contact information of these Community Hospitals.

The services provided at each community hospital are generally the same. The majority of patients seen in community hospitals are those who require an extended period of rehabilitation (i.e. physical and occupational therapies) after the acute hospitals’ management and treatment for conditions such as stroke, joint replacement surgeries, fractures, and other types of surgeries. The community hospitals also
provide medical and nursing care for patients who require an extended period of recovery from their medical conditions, facilitating reorganisation of physical, psychological and social needs so that patients can resume daily activities after the episode of illness or trauma.

In addition, some community hospitals have developed their capabilities to offer additional services to assist patients with specific care needs such as complex wound care, palliative care, dementia, dialysis, etc. Overall, the services provided by the community hospitals will help patients return to family and community life, engaging in their usual roles and responsibilities, and enabling patients to actively contribute to their social groups and society again.
1.1 Inpatient Services Provided in Community Hospitals

Depending on your condition, your length of stay in the Community Hospital can range from a few days to a few weeks.

The admission to the Community Hospitals for inpatient care is arranged through referrals from your doctor in the public and private acute hospitals. A personalised care plan would be developed for you by a care team of doctors, nurses and allied health professionals (physiotherapists, occupational therapists, speech therapists, dieticians and pharmacists). An example of a typical care pathway for a patient with hip fracture is illustrated below.

The inpatient services provided by community hospitals are:

a) Rehabilitative Care

b) Sub-acute Care

Credits: Therapy at JCH
Rehabilitative Care

Rehabilitative care refers to therapy provided by trained therapists (i.e. physiotherapists, occupational therapists and speech therapists) to improve one’s post-illness disability and functional impairment so as to optimise his/her activities of daily living (ADLs) and facilitate re-integration to one’s home environment or other long-term care settings.

If you require assistance to regain and maximise your physical function, you will be provided with physiotherapy, occupational therapy and/or other forms of therapy as part of rehabilitative care. The rehabilitation provided may be in a one-to-one or group setting, depending on your needs.

Examples of conditions requiring rehabilitation care after stabilisation of acute issues include brain injury and other neurological conditions (stroke, traumatic injury, Parkinson’s disease etc.), as well as fractures and hip replacements.

Credits: (Left) Group therapy at RCCH, (Right) Physiotherapy at AMK-THKH
Sub-acute Care

If you are recovering from a complicated medical condition and require additional medical and nursing care at a lower intensity (as compared to that provided at the acute hospitals), sub-acute care will be provided. If required, physiotherapy, occupational and/or speech therapy services may also be provided, to help you regain your physical function to perform everyday activities.

Examples of conditions requiring sub-acute care after stabilisation of acute issues are congestive heart failure, ischaemic heart diseases, infectious disease conditions including chest infection, skin infection, kidney failure patients and post-operative patients requiring medical and nursing care.

Some community hospitals can provide additional services, such as the following:

a) Palliative care: Palliative services in the community hospital assist patients suffering from end-of-life conditions with the required medical intervention, nursing care, psychosocial support, and caregiver training.
b) **Sub-acute dementia care:** Dementia care in the community hospital assist dementia patients, usually those with active behavioural and psychological symptoms of dementia, with activity-based care and therapy sessions to engage them and improve their well-being. These patients may also concurrently receive rehabilitation, medical and nursing intervention as necessary.

c) **Dialysis services:** Patients with renal conditions who are discharged from acute hospitals may also receive care and dialysis during their stay in community hospitals. The dialysis services may be located in the community hospital, adjacent acute hospital or nearby dialysis centres. These patients may also concurrently receive rehabilitation, medical and nursing intervention as necessary.

d) **Wound care:** Patients with wounds that require medical and nursing care may be transferred to community hospitals after their medical conditions are stabilised at the acute hospitals.

*Credits: (Left) BVH’s nurse providing wound care, (Right) YCH’s doctor checking on patient*
1.2 Seamless care from acute hospitals to community hospitals

Acute hospitals and community hospitals work closely together to ensure that your transfer of care is coordinated and seamless. Once the care team at the acute hospital identifies that you are suitable for continuing care in the community hospitals, care coordinators, medical social workers and nurses will engage you and your family to discuss your transfer of care to community hospitals.

1.3 Beyond Community Hospital Care

While the majority of patients return home after inpatient care at community hospitals without needing further follow-up, a proportion of patients may require follow-up outpatient services. Your care team will advise if such follow-up services are required, and will provide a referral if required. You may refer to the Agency for Integrated Care’s website for more information on day care and home care services: https://www.aic.sg/for-seniors-and-caregivers/care-services

a) Day Rehabilitation Centre (DRC)

All community hospitals operate day rehabilitation centres to provide outpatient rehabilitation services for patients who require additional therapy to help them achieve maximum function. The services provided include physiotherapy and occupational

Credits: (Left) Therapy at SLH, (Right) Therapy at YCH
therapy. Some Community Hospitals also offer outpatient speech therapy services.

b) **Home Care Services (HCS)**

Some Community Hospitals also provide a suite of HCS from Home Nursing, Home Medical to Home Therapy Services. These services help to support patients who have difficulty accessing outpatient services. Caregiver education and training is also provided, where caregivers are trained to assist patients with eating, showering, and transferring from bed to chair.
Chapter 2: Payment of your Community Hospital Bill

2.1 Government subsidies for Community Hospital Services

If you are a Singaporean or Permanent Resident, you will be eligible for subsidies for the services you receive in the seven Community Hospitals.

Government subsidies are based on 6-tier household means-tested subsidy framework (Table 1).

Table 1: Subsidy rates for services provided by Community Hospitals

<table>
<thead>
<tr>
<th>Household Per Capita Monthly Income</th>
<th>Inpatient Community Hospital Services</th>
<th>Outpatient Community Hospital Services (e.g. Day Rehab or Home Care Services)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Singapore Citizens</td>
<td>Permanent Residents</td>
</tr>
<tr>
<td>$0 to $700</td>
<td>75%</td>
<td>50%</td>
</tr>
<tr>
<td>$701 to $1,100</td>
<td>60%</td>
<td>40%</td>
</tr>
<tr>
<td>$1,101 to $1,800</td>
<td>50%</td>
<td>30%</td>
</tr>
<tr>
<td>$1,801 to $2,600</td>
<td>45%</td>
<td>25%</td>
</tr>
<tr>
<td>$2,601 to $3,100</td>
<td>40%</td>
<td>20%</td>
</tr>
<tr>
<td>$3,101 and above</td>
<td>20%</td>
<td>10%</td>
</tr>
</tbody>
</table>

If you are from a lower income household, you will be granted higher subsidies under the means-testing framework, which takes into consideration either:

a) Your gross income, gross income of your spouse and all family members living in the same household; and

b) Total number of family members living in the same household; or
c) Annual value of your place of residence if your household has no income

The medical social workers and administrative staff of the acute hospital or the Community Hospital will assist you with your application for government subsidies.

2.2 MediShield Life and Integrated Shield Plans for Inpatient Community Hospital Admissions

If you are referred to one of the seven community hospitals upon your discharge from the approved acute hospital inpatient stay, you are eligible to claim from MediShield Life, subject to a claim limit of $350 per day, applicable deductible for the policy year in which you were admitted, and co-insurance.

If you have Integrated Shield Plans (IPs), you should check with your IP insurers on the policy’s terms and conditions.

2.3 Medisave

If you are admitted as an inpatient to the community hospitals, the use of your, or your immediate family members’ Medisave is subject to a withdrawal limit of $250 per day, including a maximum of $30 for doctor’s attendance fees, up to a maximum of $5,000 per calendar year.

Some community hospitals provide outpatient rehabilitation services in their day rehabilitation centres. If you are referred to these day rehabilitation centres for active rehabilitation by a Singapore Medical Council-registered medical practitioner, the use of Medisave is subject to a withdrawal limit of $25 per day, up to a maximum of $1,500 per year. Currently, Medisave use is not allowed for home care services, day care or maintenance programmes, and rehabilitation carried out to address sports injuries, acute musculoskeletal injuries, congenital disabilities or chronic degenerative conditions without potential for significant functional recovery.
2.4 Medifund

Singapore citizens are eligible to tap on Medifund if they require additional financial assistance with their remaining inpatient bills after receiving Government subsidies and drawing on other means of payment, i.e. MediShield Life, Medisave and cash. A medical social worker can assist you in the application for Medifund if you are facing difficulties in paying for your Community Hospital stay.
Appendix A

General Information for Community Hospitals

1. Ang Mo Kio – Thye Hua Kwan Hospital
   
   Address: 17 Ang Mo Kio Ave 9, Singapore 569766  
   Tel: 6453 8033  
   Email: enquiry@amkh.org.sg  
   Website: http://www.amkh.com.sg

2. Bright Vision Hospital
   
   Address: 5 Lorong Napiri, Singapore 547530  
   Tel: 6248 5755  
   Email: enquiries@bvh.org.sg  
   Website: http://www.bvh.org.sg

3. Jurong Community Hospital
   
   Address: 1 Jurong East Street 21, Singapore 609606  
   Tel: 6716 2000  
   Fax: 6716 5500  
   Email: enquiries@juronghealth.com.sg  
   Website: http://www.jch.com.sg

4. Ren Ci Community Hospital
   
   Address: 71 Irrawaddy Road, Singapore 329562  
   Tel: 6385 0288  
   Fax: 6358 0900  
   Email: renci@renci.org.sg  
   Website: http://www.renci.org.sg
5. **St Andrew’s Community Hospital**

   Address: 8 Simei Street 3, Singapore 529895  
   Tel: 6586 1000  
   Email: [general@sach.org.sg](mailto:general@sach.org.sg)  
   Website: [http://www.sach.org.sg](http://www.sach.org.sg)

6. **St Luke’s Hospital**

   Address: 2 Bukit Batok Street 11, Singapore 659674  
   Tel: 6563 2281  
   Email: [general@stluke.org.sg](mailto:general@stluke.org.sg)  
   Website: [http://www.slh.org.sg/wp](http://www.slh.org.sg/wp)

7. **Yishun Community Hospital**

   Address: 2 Yishun Central 2, Singapore 768024  
   Tel: 6807 8800  
   Email: [enquiry@alexandrahealth.com.sg](mailto:enquiry@alexandrahealth.com.sg)  
   Website: [http://www.yishuncommunityhospital.com.sg](http://www.yishuncommunityhospital.com.sg)
For further queries, please contact:
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College of Medicine Building
16 College Road
Singapore 169854
Tel: 6325 3427
Fax: 6226 0139
Email: MOH_INFO@MOH.GOV.SG