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VWOs in eldercare to get new IT system

Winnie Tan

When his physiotherapy sessions included Latin music and dance, a senior citizen who was recovering from a stroke perked up and made good progress.

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Mr Lim The Leng, 70, had been listless when he first started physiotherapy with Touch Home Care (THC) after suffering a stroke and several falls at his Ang Mo Kio home.

Then an attentive THC nurse

Then an attentive THC nurse told the physiotherapist that Mr Lim enjoys Latin dancing.
So the therapist incorporated

So the therapist incorporated Latin music into the sessions, even occasionally dancing with him. This motivated him to meet his therapy goals after 18 visits.

Next year, voluntary welfare organisations (VWOs) treating the elderly will be able to get a Facebook-like timeline of their client's history and interests from a new healthcare information technology system, called IngoT PCC (Person-Centred Care).

"Currently, care plans and individual needs are recorded manually," said Mr Tan Song Mong, director of the People's Action Party (PAP) Community Foundation's Senior Care Division.

These will be integrated into a single platform to improve the productivity of eldercare operators. IngoT PCC was developed with funding from philanthropic house Lien Foundation.

Its chief executive officer, Mr

Lee Poh Wah, said: "We have eradicated more than 140 types of paper, forms and reports by digitising all the processes and interactions. Productivity has increased by 10 per cent."

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IngoT has been around since 2007. The latest edition, IngoT PCC, will be given free to 11 VWOs that run 25 eldercare services and centres.

Developed by aged care tech-

nology solutions provider Pulsesync, the system is scheduled to be deployed early next year.

Its managing director, Mr Ken

Its managing director, Mr Ken Tan, said: "We know so much, yet so little about our patients."

Mr Lee said: "We want to drive a paradigm shift towards a person-centred care philosophy. Our seniors are people, not just a collection of medical conditions.

"We must focus not just on medicine, but also connect those in the circle of care, build relationships and trust and, above all, maximise quality of life for our seniors."

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