

# What Makes a Health System Truly Work for Its People: Insights from Sheriff Abdullahi

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Photo of CHI's 16th Masterclass Q&A session. From left to right: Professor Jonathon Gray (Member, CHI Leadership Council) and Dr Sheriff Abdullahi (Member, CHI Leadership Council)

This article is inspired from the CHI 16th Masterclass, “Transforming the Healthcare Ecosystem: The Things We Tend to Ignore and Sometimes Get Wrong” by Dr Sheriff Abdullahi, Managing Director of Merck Sharp & Dohme (MSD). As a healthcare systems architect and strategic leader with deep experience in UK’s National Health Service (NHS), Dr Sheriff challenged us to reimagine healthcare delivery through the lens of preventive care, integrated care, and alignment of health services to real needs.

At the heart of his sharing was a question that defined the masterclass: ***What makes a health system truly work for its people?*** The answer lies not just in treating illness, but in designing systems that promote health, integrate care, and adapt to the needs of the population.

## Preventive Care: The Best Health System is One You Don't Need

**“The best health system is the one nobody needs to use because everyone is so healthy.”**

Dr Sheriff’s statement reminds us of a simple but overlooked truth: prevention is better than cure. When we shift from a system that reacts to illness to one that proactively keeps people well, we create a healthier population and in return, reduce burden on the healthcare system.

In Singapore, chronic diseases like diabetes and heart disease are some of the biggest contributors to our healthcare burden. These conditions often have roots in lifestyle choices like poor diet, smoking, stressful lifestyle, and lack of exercise – key social determinants of health.

Dr Sheriff praised Singapore’s Healthier SG initiative that aims to address these social determinants of health, tackling the root causes of ill health before they require medical intervention by promoting regular physical activity, health screenings and better health seeking behaviours. He emphasised that it provides a robust foundation for driving meaningful change in population health and preventive care.

NHG’s efforts complement this by extending care beyond hospitals through initiatives like the Community Health Teams (CHT). Our CHTs work directly with residents to holistically manage chronic conditions and promote healthier lifestyles, reducing the frequency of hospital visits.

### Integrated Care: Breaking Down Silos for Seamless Care

Singapore's health system has many touchpoints, ranging from primary to acute, community and social care, as well as informal relational networks. True integration of healthcare coordinates and connects every part of the system so that no patient falls through the gaps.

**“ If the system doesn't connect or work across its various boundaries, formal and informal – the system falls apart.**

When organisations operate in silos, we accelerate segregation, which may inevitably lead to a disservice to our patients. In Dr Sheriff's vision of an ideal health system, care does not stop the moment a patient is discharged. The system must ensure that someone – whether it is a community nurse, family member, or social worker,



Photo of Professor Jonty Heaversedge (Clinical Director and CCIO, Population Health Office, NHG), during the Q&A segment of CHI's 16th Masterclass.

At NHG, steps have been taken to ensure care does not stop when a patient leaves the hospital. Family physicians are linked with specialists, nurses, allied health professionals and social services through our Communities of Care. At Tan Tock Seng Hospital, when a patient is discharged from the hospital post-

training of staff and ensuring that the right people are placed in the right roles at the right time. For example, ensuring enough geriatric specialists to address the needs of an ageing population, or transforming the workforce through training community nurses to support chronic disease management. These efforts don't just



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