

Republic of Singapore

Agenda No. 22

Strengthening rehabilitation in health systems (“One Rehab”)

Written Statement

Singapore thanks the Secretariat for the report on strengthening rehabilitation in health systems and welcomes the continued emphasis on rehabilitation as an essential component of universal health coverage.

2 As populations age and survival from acute illness improves, health systems must place greater weight on function, independence, and participation in daily life. Rehabilitation is therefore a core system capability that shapes health outcomes. Fragmented delivery, late referrals, and weak continuity across settings reduce the value of rehabilitation and limit its impact.

3 In Singapore, our approach has been to strengthen rehabilitation through system integration rather than isolated service expansion. The National One-Rehabilitation Framework (“One Rehab”) provides a common language among healthcare professionals in the acute, community and primary care settings. It aligns rehabilitation pathways, outcome measures, and allows data sharing across settings, enabling individuals to receive rehabilitation at the appropriate time and place, including closer to home where feasible.

4 A key feature of One Rehab is the use of harmonised clinical outcomes across providers for selected conditions at the outset. This supports person-centred goal setting while enabling system-level monitoring of rehabilitation effectiveness. By tracking outcomes end to end, providers can better coordinate care transitions, and policymakers can identify gaps in access, variation in quality, and areas requiring workforce or service redesign. This approach has been particularly relevant for national priorities such as ageing, stroke recovery, musculoskeletal conditions, and post-acute functional decline. At the same time, Singapore’s experience highlights that measurement and standardisation must be implemented carefully. Outcome frameworks require sustained clinical engagement, appropriate training, and proportional data demands to avoid creating administrative burden or narrowing clinical focus. Data should support care and learning, rather than displace professional judgement or crowd out time for patient interaction.

5 One Rehab also supports timely and more proactive rehabilitation. Clear rehabilitation pathways and shared care plans facilitate timely initiation of rehabilitation following acute events, while strengthening links with community and home-based services. This reduces unnecessary hospital utilisation and supports functional recovery in familiar environments.

6 Singapore welcomes WHO's work to advance global rehabilitation indicators and effective coverage measurement. Singapore supports a phased approach. The initial priority is to establish a robust global baseline as a foundation before target-setting, recognising the importance of data quality. In the current context, prioritising a limited set of high-value indicators and leveraging existing data platforms and partnerships will be critical. Indicators should encompass both service coverage across key rehabilitation areas and functional outcomes meaningful to patients¹. Timelines for global reporting should remain pragmatic, so that early efforts strengthen credibility and learning rather than dilute focus or overstretch capacity.

7 We remain committed to sharing practical lessons from our experience and to working with WHO and Member States to strengthen rehabilitation as an integral component of resilient, people-centred health systems.