



Life is a journey,  
and it's always  
comforting to  
have someone  
walking with you,  
by your side.

Mr and Mrs Teng Fook Wing  
*CHAS beneficiaries*

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Message from

## DR JENNIFER LEE

*Chairman*

FY2011 was an exciting year for the Agency for Integrated Care (AIC) and I am sure, for many of our partners and stakeholders too. Together, we started many meaningful initiatives, set the foundation for lasting collaborations, reviewed the way we carry out our work, and most importantly, improved the lives of the clients we serve.

Over the past year, AIC has learnt and gained much from our Advisory Committees, partners and stakeholders. I thank each and every collaborator for so generously giving your time, sharing your expertise, and steering the course of AIC and the sectors we serve.

We continue to forge deeper partnerships with the primary, Intermediate and Long-Term Care (ILTC) and Community Mental Health (CMH) sectors. Our first survey for General Practitioners (GPs) was a success, thanks to the participation of over 500 GPs who took the time to share their insights, aspirations and concerns. We deeply appreciate the participation of our health and social care partners, in the development of the CMH Masterplan to create a stronger CMH sector for our clients.

We remain grateful for the continued support of Temasek Cares and the Singapore Totalisator Board. Their generous funding has allowed AIC and our ILTC partners to pilot a number of innovative community

care projects. Service providers have also been able to tap on these funds to improve their technology, business processes and productivity. We look forward to facilitating more of such collaborations in the coming year.

Our achievements are also the result of the countless hours put in by community volunteers and grassroots leaders, who have worked and walked alongside AIC to visit residents in need, and to ensure that our assistance schemes reach those on the ground.

On behalf of the Board, I would like to bid a fond farewell and acknowledge the dedication and contributions of two Board members, Dr Tham Tat Yean and Mr Laurence Lien, who will be stepping down in August 2012. I would also like to express our heartfelt thanks to former Minister for Health, Mr Khaw Boon Wan, whose foresight and guidance were invaluable and instrumental in shaping AIC's role in the healthcare sector, and former Permanent Secretary (Health), Ms Yong Ying-I, whose vision and leadership led to the creation of AIC.

Lastly, I thank our AIC employees for all the hard work in the last year, without whom AIC would not have been able to deliver as much as it did. The Board and I look forward to your continued passion and zest to improve the health outcomes of the clients we serve.



Message from

## DR JASON CHEAH

*Chief Executive Officer*

because of more integrated care services. One such example is the Singapore Programme for Integrated Care for the Elderly (SPICE), catering to patients who would normally have been admitted to a Nursing Home. SPICE provides a multi-disciplinary approach to deliver enhanced support for such patients in a Day Centre, so that they can return home in the evenings to their families and caregivers. Touch Home Care's opening in Jurong also made home care more accessible to patients in the vicinity, and provided relief to many families. I would like to thank our fantastic and committed partners and stakeholders who have made these care services possible. These early successes have been most welcomed by clients and families, and I look forward to building more such trusted and long-term collaborations with our many partners in the coming years.

Our partners' commitment to learning and improvement through various Quality Improvement (QI) initiatives are beginning to make a real difference in the care they provide. Over the past year, nursing home residents were supported to be weaned off tube feeding and could experience again the taste and texture of food; AIC's nutrition programme helped improve not just the nutritional value but also the taste of meals served to nursing home residents; incidents of falls and cases of aspiration pneumonia caused by nasogastric tubes also declined. I am sure there will be many more meaningful opportunities for further improvements to the quality of care in future.

I am most thankful for all the warm support we have received thus far, without which AIC would not have been able to grow as fast as we have and serve the many clients who need our services and support. To prepare the healthcare system for tomorrow's challenges, AIC, in support of the Ministry of Health's (MOH) Healthcare 2020 strategy, will strive to find new ways to better synergise and collaborate with our partners and stakeholders. We are committed to ensuring that those who require chronic and long term care services have access to them in a hassle-free manner. As we continue to enhance the quality of care through new care models and innovative pilot programmes, we also hope that more providers in the primary, community and mental health sectors will join us in our journey of learning and growth. I look forward to continuing our efforts to build and enhance an outstanding integrated healthcare system in Singapore.

For a young organisation such as AIC, every year feels different from the last. We are constantly evolving - innovating, collaborating, and broadening our scope of work to meet the ever changing needs of our ageing population and the clients we serve. What has remained constant in AIC is our commitment to serve our clients in the community, and to enable them to age-in-place gracefully.

I am happy to report that in the year 2011, we managed to better support the wishes of more elderly clients to age-in-place, near their loved ones in the community, through a number of our initiatives and activities. AIC's four-year pilot ACTION programme has demonstrated very positive results (such as reduced re-admission rates and real cost savings to patients and to government) and has been extended for the long term. Since their inception, ACTION teams have assisted over 23,000 patients by linking them up with the necessary services to remain safe in the community. Building on the success of the ACTION programme, AIC launched a new pilot to provide case management services to frail elderly to enable them to continue living in the community.

In this yearbook, you will also read about Mr Mohd Salim who, as a result of our outreach efforts with grassroots volunteers to help needy residents benefit from the Senior's Mobility Fund (SMF), now finally owns a wheelchair light enough for his wife to push around. This has given Mr Salim and his wife a new sense of freedom as they can now meet up with friends at their neighbourhood coffee shop. More than 500 elderly beneficiaries other than Mr Salim have improved their mobility or regained their independence in the community after the launch of this Fund.

There are many other "success stories" of the frail elderly who have managed to stay well in the community



# A GLIMPSE INTO FY2011

- \$10 million Senior's Mobility Fund (SMF) launched to help seniors remain mobile within the community



- Set up of Community Case Management Service to help patients remain and age comfortably in the community for as long as possible

- 88 recipients presented the HMDP-ILTC awards by Minister for Health, Mr Gan Kim Yong

- ILTC Learning Management System launched to facilitate the learning pathways of ILTC professionals

- Launched Primary Care Pages, an online portal for General Practitioners in Singapore

- First SMF community outreach programme with Tanglin-Cairnhill grassroots and volunteers from Ngee Ann Polytechnic and Buddhist Life Mission. 23 residents received mobility aids to help them move around the community

- Over 300 healthcare professionals from the ILTC and acute sectors attended the first ever ILTC Quality Festival 2011

- Opening of Singapore Programme for Integrated Care for the Elderly (SPICE) @ Tembusu, located in the western region of Singapore

- Launch of Care In Mind, a one-stop portal offering information and resources on mental wellness

- 17 ILTC leaders graduated from first run of the INSIGHT Leadership course

- Collaborated with Institute of Mental Health to publish a Community Mental Health edition of NEXTSTEP

- ILTC Nutrition Movement and launch of 'Cooking For Health' cookbook

- Launch of CarersSG, a facebook community page which reaches out to more than 3,000 caregivers

- AIC Learning Institute completed 110 runs of courses with more than 3,800 training places provided since April 2011

- More than 5,000 patients have benefitted from the ACTION programme.

April  
2011

May

June

July

August

September

October

November

December

January  
2012

February

March



- Over 1,000 Intermediate and Long-Term Care (ILTC) staff celebrated first-ever Hand Hygiene Day

- Temasek Cares-Study Award Selection Committee formed. Five students have received the award so far

- Partnered the Pharmaceutical Society of Singapore on first Pharmaceutical Care Programme for nursing homes

- Start of community outreach to grassroots and residents in nine priority areas with a high concentration of elderly population

- Appointed administrator of Tote Board Community Healthcare Fund (TBCHF). 25 projects were approved under the TBCHF



- Developed Nursing Home Guide to help nursing homes assess their practices and services



- New TOUCH Home Care centre set up in Jurong to provide home care services in the western region

- Organised first Community Mental Health Forum for the health and social care sectors which was attended by 75 participants

- Community outreach in Tanjong Pagar-Tiong Bahru and Radin Mas constituencies

- Community outreach in Buona Vista and Geylang Serai constituencies



- Appointed administrator of Community Health Assist Scheme (CHAS)

- Collaborated with O' Joy Care Services to pilot the Community Mental Health Intervention Team (COMIT) in the northern region of Singapore

- Collaborated with Thye Hua Kwan Moral Charities to pilot the Community Resource, Engagement and Support Team (CREST)

- Second ILTC Night attended by close to 900 staff from the ILTC sector

# JOURNEY WITH OUR PATIENTS AND CAREGIVERS

Our patients' journey begins from the time they leave the hospital. Elderly patients transiting from hospital to community care settings are particularly vulnerable. We need to help them move from one care setting to another with ease and confidence. Seniors with healthcare needs require a care team and care plan that cater to their conditions and preferences. Even caregivers require support when the elderly they are caring for move from the hospital, to rehabilitation centre, or home. Depending on living arrangements and care needs, elderly patients and their caregivers have various care options available.

Home-based care caters to those who prefer to recover at home and to continue to live in the community with their family and friends.

Eldercare or day care centres care for the elderly in the day, and allow them to return home in the evening.

Stay-in facilities such as hospices, community hospitals or nursing homes cater to those who are unable to care for themselves or cannot be cared for in their own homes.

Schemes and subsidies are also available to make healthcare more affordable to those in need.

Between April 2011 and March 2012, AIC handled more than 20,000 referrals to these care settings.

We share some stories of patients and caregivers, and how they have benefitted.

**942 referrals**

Dementia Day Care Centres

**5,233 referrals**

Home Care

**1,993 referrals**

Hospice Care

**5,331 referrals**

Day Rehabilitation Centres

**2,421 referrals**

Nursing Homes

**7,252 referrals**

Community Hospitals



# ACCESSING CARE IN THE COMMUNITY

## From ACTION to Case Management

The Aged Care Transition (ACTION) team helps elderly patients' transit from hospital to home. Comprising care coordinators based at hospitals, the help includes arranging for appropriate community services for the patient and caregiver at home, and even aiding with home modifications. In FY2011, ACTION has continued to benefit about 6,000 patients. Since 2008, over 20,000 patients have benefitted from ACTION and hospital re-admissions have halved.

In June 2011, the Community Case Management Service (CCMS) was introduced as an extension of the ACTION project. Elderly patients requiring close monitoring and help after hospital discharge are referred to Case Managers, who work with them and their family members to carry out customised care plans. These include monitoring medical conditions and medication adherence, making home visits, coordinating referrals and clinical appointments, sourcing for financial assistance and service providers for home modification, providing befriender service, and counselling patients and their families. These enable the elderly to receive the right care at the right place and at the right time

– letting them age comfortably and safely in the community, for as long as possible.

Mr Khoo Giat Kan, 76, is one such patient referred to the Community Case Management Service (CCMS) by an ACTION Care Coordinator because he needed continued long-term care. Case Manager, May Chan shares how she partnered Mr Khoo in his care journey...



**L - R** Case Manager May Chan and Case Manager Assistant, Wendy Wong attending to Khoo Giat Kan.

## Adding more SPICE

The Singapore Programme for Integrated care for the Elderly (SPICE) is an alternative care model for seniors to have their care needs met in a day care centre and/or at home, hence enabling them to remain in the community with their loved ones. A multi-disciplinary team comprising medical, nursing, allied health and support staff develops and implements individualised care plans to maintain the physical and mental well-being of the frail elderly. Home assessments and modifications and caregiver training are also conducted.

SPICE was launched in October 2010 at the Salvation Army – Bedok Multiservice Centre. In October 2011, a second SPICE was set up at Tembusu Rehabilitation and Day Care Centre. To date, 59 elderly patients have benefitted from SPICE.

While nursing homes are viable options for frail elderly with high care needs, many prefer to age-in-place in their community.



Minister of State for Health, Dr Amy Khor, interacting with the nurses and patients of SPICE at Tembusu.

“ Mr Khoo suffered a stroke and was diagnosed with a form of arthritis and bone loss (Osteopenia). His swollen left leg made it difficult for him to perform his daily functions, and resulted in multiple readmissions to the hospital. In addition, he had to take many medications and felt nauseous after consuming them.

Through close monitoring by fellow Case Manager Assistant Wendy Wong and myself, Mr Khoo's medication was reduced to only the essentials. This helped stabilise his condition and reduced the swelling in his left leg.

We also enlisted help from a TOUCH Home Care volunteer to accompany Mr Khoo for his medical appointments, and from the Home Nursing Foundation to pack and administer Mr Khoo's medication three times a week.

Today, Mr Khoo says he is more at ease and his quality of life has improved. ”

May Chan  
Case Manager



## Staying HOME



Lincoln Wong getting his medical checkup done by Nurse Kalaichelvi Athimoola

### Lincoln Wong, 65, diagnosed with Chronic Obstructive Pulmonary Disease (COPD), shares his journey under the HOME Programme.

“ The condition I have is incurable. I think it is worse than other diseases because there is no break from my breathing difficulty. Sometimes, my breathing attacks can come without warning. I know I will get weaker, and more and more, I will need help with things that healthy people can do easily. I also prefer to receive care at home and being on the HOME programme has helped me achieve this.

Recently, I had breathing difficulty at 1am. I called Dr Ho, my HOME programme doctor, and I didn't expect him to arrive so soon because he was located some distance away. His prompt response to my distress helped ease my breathing difficulty.

Another HOME team member, Ms Kalai, visits me regularly. She is a nurse who monitors my condition bi-weekly, and more frequently if my condition worsens. This allows her to detect my symptoms so that I can be treated by my doctor early.

The phone number which connects me 24/7 to the HOME team gives me confidence to be on my own. I can depend on them in times of difficulty.

The HOME programme also assisted me in other ways. I wanted a maid to help look after me, so Kalai and her team convinced my sons that having a maid to help care for me would be in my best interest. Now the maid accompanies me whenever I go out. Going out means a lot to me so that I don't become lazy!

When the time comes, I don't want to receive artificial means to stay alive because I don't want to prolong my suffering. A counsellor from the HOME team had conversations with me and my family members to discuss about my preferences and they will help me make decisions when I'm unable to do so. I'm glad we had these conversations. ”

**Lincoln Wong**  
HOME Programme patient

## HOME

Initiated in May 2008, the HOListic care for MEdically advanced patients (HOME) Programme, enables terminally-ill patients to be cared for in the comfort of their own home and to pass on with dignity. Under HOME, a customised palliative home care plan is developed with the patient and their loved ones, and comprises end-of-life medical and nursing services, psychosocial support for patients and caregivers, and Advance Care Planning (ACP).

The HOME team comprises counsellors who provide emotional support to patients and their family members as well as facilitate Advance Care Planning (ACP), nurses who administer care plans, and doctors who regularly review their patients' condition.

Currently, the HOME Programme receives cases from National University Hospital and Tan Tock Seng Hospital. The programme will be rolled out to more hospitals in 2012. 591 patients have benefited from HOME as of 31 March 2012.



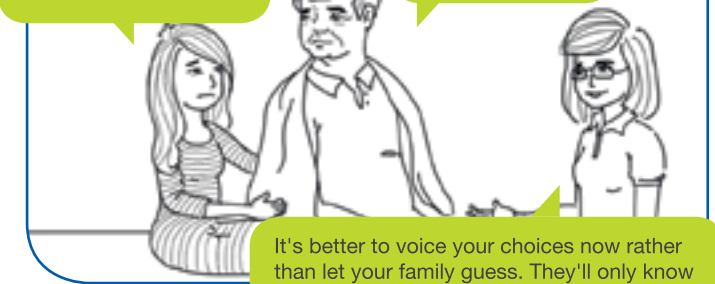
The conversations the counsellor had with Lincoln and his family included Advance Care Planning (ACP), a process which empowered him to plan in advance and decide on his desired healthcare plans. Known as "Living Matters" in Singapore, ACP eases the burden of the patient and his family members from making difficult healthcare decisions in the event of a medical crisis.

The patient's preferences are documented by a trained ACP facilitator. Currently, ACP certified facilitators include doctors, nurses, medical social workers and other allied health professionals. Since April 2012, AIC has been reaching out to service providers and community partners to create greater awareness of ACP, and train facilitators. To date, 406 facilitators have been trained.

### 1 Shortly after a hospital discharge

Daddy, when you were unconscious, we did not know what to do...

It was so sudden and unexpected...

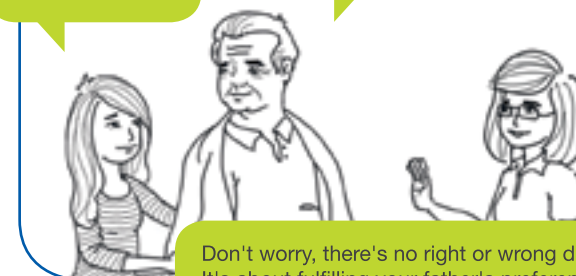


It's better to voice your choices now rather than let your family guess. They'll only know what you want if you tell them.

### 2 A comprehensive discussion with an ACP facilitator later...

But daddy, I'm afraid of making the wrong choice.

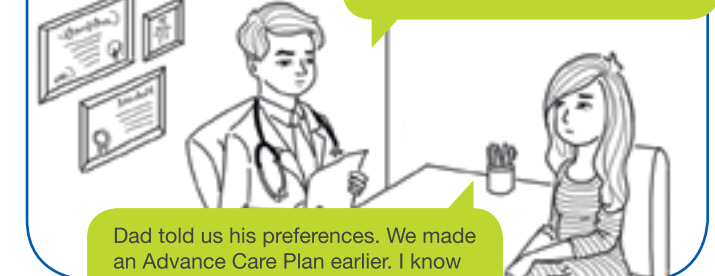
I trust you to be my substitute decision maker.



Don't worry, there's no right or wrong decision. It's about fulfilling your father's preferences.

### 3 Six months later, Mr Tan collapsed again and is rushed to the Intensive Care Unit.

It's been two weeks since your father collapsed. It doesn't look good. What are your instructions?



Dad told us his preferences. We made an Advance Care Plan earlier. I know what he wants...



Staying Mobile within the Community

Mdm Patimah and her husband, Mr Mohd Salim, used to visit their nearby coffee shop. But as they aged, Mr Salim’s mobility started declining and needed a wheelchair.

The Senior’s Mobility Fund (SMF) enables needy elderly such as Mr Salim to move around in the community. Through this scheme, Mr Salim bought a suitable mobility device at a subsidised cost. Today, he is able to accompany his wife to their favourite coffee shop for a cup of coffee.

A transport subsidy is also available under SMF for needy elderly requiring specialised transport services to day rehabilitation centres for therapy. This makes it more affordable for patients to go for rehabilitation.



Mdm Patimah and her husband, Mr Mohd Salim, can now move around in their community.

SMF

LAUNCHED  
18 APRIL 2011

**530** CLIENTS HAVE BENEFITTED FROM SMF  
SUBSIDISED MOBILITY DEVICE PURCHASE

**96** CLIENTS HAVE BENEFITTED FROM SMF  
SUBSIDISED TRANSPORT SUBSIDY  
(\*figures as of 31 March 2012)



SMF beneficiaries enjoying a day out after receiving their new mobility aids.

Subsidies for Medical and Dental care



Residents signing up for CHAS at a community roadshow.

The Primary Care Partnership Scheme, launched in 2000 to provide accessible and affordable primary care to more Singaporeans, was renamed the Community Health Assist Scheme (CHAS) in January 2012. With the lowering of the age criteria from 65 years to 40 years, and the raising of

average household monthly income from \$800 to \$1500, more middle and low income Singaporeans can benefit from subsidies for medical and dental care at participating CHAS clinics. Eligible CHAS users and their family members living under the same roof will each receive a Health Assist card.

Mdm Mary Reathea, 59, visits her neighbourhood doctor every month for treatment of diabetes and hypertension. By producing her Health Assist card during such visits, Mary is able to receive subsidised medical care.

“ Through CHAS, my treatments are more affordable. I can save the money I usually spend at the doctor’s for a rainy day. ”

Mdm Mary Reathea  
*CHAS Beneficiary*



CHAS

OVER **120,000**  
SINGAPOREANS HAVE  
SIGNED UP FOR CHAS.

CURRENTLY, **493 GPs** AND  
**252 DENTAL CLINICS**  
OFFER SUBSIDISED TREATMENTS TO CHAS  
CARD HOLDERS ALL OVER SINGAPORE.



# EMPOWERING THE COMMUNITY

## Engaging the Ground



Explaining our schemes and available help to residents.



Briefing Prime Minister on the help available for the elderly.



Member of Parliament, Chan Chun Sing, giving mobility aids to SMF beneficiaries.

To reach out to a wider public, it is important to build deep and sustainable relationships with the community.

Between August 2011 and March 2012, we engaged 35 of 87 constituencies through various partnerships with grassroots and community partners. The engagement efforts covered nine of our focus areas that have a high concentration of elderly.

Through our briefings to Members of Parliament and grassroots leaders, and participation in over 40 community events, residents are empowered on eldercare services, resources and schemes available, enabling them to navigate the healthcare system confidently. These residents were also able to access information on eldercare services from the collaterals displayed at more than 500

community venues in Singapore, as well as from Singapore Silver Pages ([www.silverpages.sg](http://www.silverpages.sg)).

To ensure that more Singaporeans benefit from our schemes, we co-developed and customised programmes with grassroots organisations to meet their needs. An example is the SMF Outreach Programme, where we partner grassroots leaders and volunteers to do several door-to-door outreach to generate awareness and identify needy residents who can benefit from AIC's services. Such customised outreach programmes have helped to increase the take-up rate of our schemes. Since August 2011, our community engagement efforts have reached out to more than 25,000 residents.



By partnering AIC, Central Singapore CDC has better accomplished its role to assist the people and to connect with the community. We are able to inform our partners and educate our residents about the availability of national schemes such as the Senior's Mobility Fund and the Community Health Assist Scheme. We help those who are eligible to apply and benefit from these schemes so that they can lead better quality lives.

Mayor Sam Tan  
Central Singapore CDC

Door-to-door outreach with grassroots and community volunteers



## Online Engagement

Besides the Singapore Silver Pages (SSP) which was launched in February 2011 as an online resource on eldercare, AIC has since launched two other e-initiatives:

### CARE IN MIND PORTAL

Rolled out in October 2011, the Care In Mind portal ([www.careinmind.sg](http://www.careinmind.sg)) complements the SSP, and offers information on mental health and wellness for patients and their caregivers. Users can learn about the different mental health conditions such as dementia and schizophrenia, find service providers, and get tips on how to better care for persons with mental conditions.



### CARERS SG FACEBOOK PAGE

Launched in March 2012, CarersSG ([www.facebook.com/carersSG](http://www.facebook.com/carersSG)) is a Facebook community page which brings together caregivers in Singapore to share information, resources and experiences in caring for the elderly as well as provide support to one another in their caregiving role. Through CarersSG, caregivers and even potential ones are encouraged to look upon caregiving positively, and be assured that they are not alone in this journey as there are many others who are also caring for their loved ones. CarersSG is a collaboration between AIC and the Centre for Enabled Living. It currently reaches out to more than 3,000 caregivers.



# JOURNEY WITH OUR STAKEHOLDERS

The journey with our stakeholders is about partnering them to strengthen leadership, people, and organisational excellence. We work with stakeholders on training and learning opportunities, celebrate milestones in improving quality of care and service standards, and applaud their efforts in their pursuit towards organisational excellence.

The journey with our stakeholders is an ongoing journey of listening and understanding their needs and working together to co-create a better healthcare system.

**PEOPLE  
EXCELLENCE**

**Over 5,500  
training places**  
provided by the AIC-Learning  
Institute since its inception

**More than 80  
healthcare  
professionals**  
received the HMDP-  
ILTC awards

**First ILTC  
Quality Festival**  
attended by over 300  
healthcare professionals

**ORGANISATIONAL  
EXCELLENCE**

**More than 20  
ILTC organisations**  
embarked on Quality  
Improvement projects

# TOWARDS PEOPLE & LEADERSHIP — EXCELLENCE —

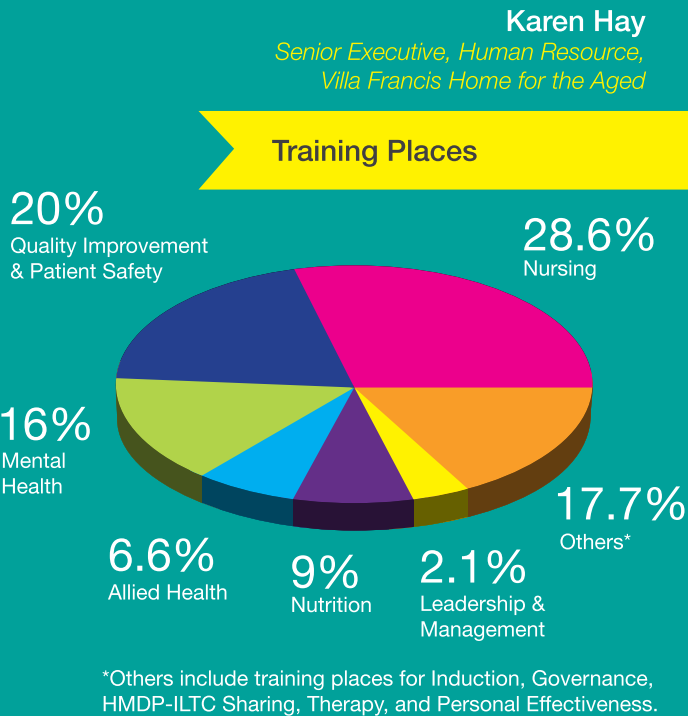
## AIC Learning Institute

“ The AIC Learning Institute has done a great job in helping the ILTC sector develop its manpower capabilities. This is evident from the range of courses conducted and developed over the past two years to cater to all levels of staff in the sector, and the funding support provided through highly subsidised fees for both local and non-local staff.

With the ILTC Learning Management System, registration of courses is now much easier. Our staff training records are captured and can be retrieved easily from the system. We look forward to what the e-learning module feature will bring in the near future. ”

The AIC Learning Institute (LI) has completed 110 runs of courses with more than 3,800 training places provided since April 2011. This was an increase of more than 70 per cent from the previous year. The LI courses conducted range from clinical to leadership training. Since its inception in February 2010, over 5,500 training places have been provided.

To support organisations and employees in their pursuit of knowledge and skills, the LI launched the ILTC Learning Management System (LMS) in August 2011. Through the LMS, ILTC professionals can access and register for LI courses. The system also enables Human Resource (HR) personnel to carry out learning needs analysis for staff, develop learning pathways, enrol staff for courses, track training hours and monitor progress. More than 2,800 ILTC professionals from over 20 organisations have benefitted from the LMS.



## Temasek Cares Study Award

The Temasek Cares Study Award supported Galvin's achievement in graduating with a Diploma in Occupational Therapy from Nanyang Polytechnic (NYP) in May 2012.

The Study Award is an education and training fund which supports students who aspire to work in nursing and allied health professions within the ILTC sector to obtain a Diploma or National Institute of Technical Education Certificate (NITEC) related to nursing, physiotherapy or occupational therapy.

Upon completion of their studies, the award recipients will join an ILTC institution. Five students have received the Study Award.



“ My ambition to become an allied health professional started during my Junior College days when I volunteered as a therapy assistant. Working alongside professional occupational therapists providing patient rehabilitation at a local hospital, I became interested in the work and enrolled myself for a course at Nanyang Polytechnic. My Diploma in Occupational Therapy, achieved through the support of the Temasek Cares Study Award, allowed me to test and develop skills and knowledge through supervised attachments at Changi General Hospital, Institute of Mental Health and KK Women's and Children's Hospital as a student therapist.

I am presently fulfilling my bond at St Andrew's Community Hospital as an occupational therapist. I chose to work in the ILTC sector because I can build better rapport with my clients and personally oversee their progress. I want to excel as an occupational therapist and it is my desire to help the elderly who are facing chronic illnesses to recover and age-in-place in the community. Being able to see them improve and regain their strength is my reward.

Obtaining the Temasek Cares Study Award has helped me realise my dream of becoming an occupational therapist in the ILTC sector. This is my passion and I am determined to stay and contribute for as long as possible! ”

Tan Choon Kiat, Galvin  
Temasek Cares Study Award recipient





Kahvidah Mayganathan is able to provide more holistic care with the new skills she learnt.

Source: Lianhe Zaobao © Singapore Press Holdings Limited. Reproduced with permission.

**“I hope more nurses will upgrade themselves through HMDP-ILTC. I am grateful for this opportunity to advance my skills and look forward to being able to better meet new challenges.”**

As a Satellite Nurse Manager, my work requires me to interact with palliative care patients who are likely to need more holistic care covering medical, social and psychosocial support. It is important that I upgrade my skills to provide the best care for my patients.

The assistance of the HMDP-ILTC enabled me to pursue a Master of Nursing degree and to become an Advanced Practice Nurse. The course covers not only palliative care but other disciplines such as cardiology and neurology. It involves research and exploring ways to improve the quality of care for patients within a real-life setting, after which, we share with classmates our experiences and the knowledge gained.

At a professional level, the course raises my ability to read diagnostic and laboratory test with improved clinical judgement, which means that I am now able to provide a greater level of care to my patients. What is priceless to me are the relationships I build and the contentment I feel when I am able to bring comfort to my patients, especially during the final stages of their life.

I hope more nurses will upgrade themselves through HMDP-ILTC. I am grateful for this opportunity to advance my skills and look forward to being able to better meet new challenges.

**Ms Kahvidah Mayganathan**  
*HMPD-ILTC Fellowship Scheme (Local) recipient*

**Health Manpower Development Programme-Intermediate and Long-Term Care (HMDP-ILTC)**

The HMDP-ILTC Fellowship Scheme enabled Kahvidah to pursue a full-time Master of Nursing programme at the Alice Lee Centre for Nursing Studies, Yong Loo Lin School of Medicine, National University of Singapore.

Upon graduation, she will become Singapore’s first ILTC sector Advanced Practice Nurse, giving her more opportunities for higher clinical and leadership roles and to better meet patients’ care needs.

Aimed at boosting the manpower capabilities of ILTC service providers, the HMDP-ILTC funds ILTC healthcare professionals to upgrade their skills through the Fellowship scheme (Local and Overseas) or through the Visiting Experts scheme. In the latter scheme, overseas experts are invited to conduct training in Singapore.



**INSIGHT Leadership**



The INSIGHT Leadership Programme, initiated by the ILTC Manpower Council and organised by AIC, is the first customised leadership development programme for senior management and leaders in the ILTC sector. INSIGHT Leadership supports ILTC leaders to gain a deeper insight into their personal leadership styles, understand ILTC

**“This course heightened my awareness of personal and strategic leadership, policy challenges and solutions within the ILTC sector. I have learnt key concepts and have acquired skills to move forward.”**

**Kavin Seow**  
*Executive Director, TOUCH Community Services*

**“As a newbie to the industry, the seminars and workshops by industry leaders, AIC and MOH officers, were helpful. They gave me a comprehensive picture of the ILTC sector.”**

**Deng Yuying**  
*Vice-President, Community Care Orange Valley Nursing Home*

operating contexts and developments in the larger healthcare systems, and equip them with skills, tools and frameworks to engage teams and lead high performance organisations. The first run of the 8-day programme was spread over three months and was attended by 17 leaders from the ILTC sector.



## ILTC CEO Learning Forum

To promote continuous learning and to provide a networking platform at the leadership level, leaders of the ILTC sector gather every quarter for the ILTC CEO Learning Forum. In 2011, four sessions were held, including talks from local and overseas leaders, and visits to organisations to learn about their best practices.

“Through the ILTC CEO Learning Forum, I get the opportunity to interact with other leaders in the sector and share best practices with each other.”

Ms Loh Shu Ching  
CEO, Ren Ci Hospital



A visit to Changi Airport and going on a tour of the facilities and learning about the "go green" efforts of the airport.



Professor Bernard Crump sharing tips on enhancing quality care.



Gaining insights through a sharing session by CEO of Changi Airport Group, Lee Seow Hiang.

# TOWARDS ORGANISATIONAL — EXCELLENCE —

## ILTC Nutrition Movement



“Many people think that nutritious food is tasteless. The Culinary Skills Training Course conducted under the Nutrition Movement has taught me to prepare nutritious yet tasty food for my nursing home residents.”

Sambugavally d/o Robert  
Resident Cook, Sree Narayana  
Mission Home for the Aged Sick

The ILTC Nutrition Movement started in 2011 to improve nutrition quality and food service for the elderly in nursing homes. 15 ILTC organisations enrolled their cooks for the Culinary Skills Training course conducted by Celebrity Chef Eric Teo. Through the training, the cooks learnt about the nutritional value of foods and gained new food preparation and service skills. A project to encourage regular screening to identify residents at risk of under nutrition and swallowing difficulties was also piloted at three nursing homes with good outcomes.

An ILTC Nutrition Month celebration was held on 28 March 2012, during which the nursing home cooks showcased their new skills. The “Cooking for Health”, a cookbook containing a collection of delicious and nutritious recipes was also launched. The cookbook was specially developed for the elderly and was distributed to all nursing homes.

At the celebration, 30 nursing home representatives pledged their commitment to the ILTC Nutrition Movement to provide quality care and good food for nursing home residents.



## Quality Improvement

The ILTC sector is committed to provide better quality care for its patients. Since 2010, 23 ILTC providers have partnered AIC on a range of quality improvement (QI) projects. One such initiative was the Enteral Feeding project championed by All Saints Home (Tampines). Besides decreasing the number of residents on Nasogastric Tube (NGT) feeding, the project also reduced the incidence of NGT-related aspiration pneumonia, an inflammation of the lungs and airways from breathing in foreign material. The general care of residents with swallowing difficulties also improved.

The Enteral Feeding project was rolled out in two phases:

### Phase 1:

All Saints Home worked with AIC to assess and improve existing enteral feeding processes.

Interventions included:

- Positioning residents upright at least 30-degrees during feeding and maintaining the position for an hour after meals;
- Ensuring feeding syringes are at optimal height during feeding; and
- Installing dishwashers to efficiently clean feeding items, giving nursing home staff more time to observe and care for residents.

### Phase 2:

Dieticians and Speech Therapists were engaged. Interventions included:

- Assessing how residents swallow their foods and identifying residents who can be weaned off NGTs;
- Training staff to better identify signs of swallowing difficulties faced by residents and to refer residents with such difficulties to speech therapists for assessment;
- Teaching staff how to achieve the right textures and consistencies for the feeds and better oral feeding techniques as well as how to enhance eating experiences by incorporating partially oral diets or small tastes of food (“pleasure feeding”); and
- Reviewing residents’ nutritional needs and to adjust feed prescriptions when necessary.

Through this QI project, several residents were weaned off their NGTs and are now able to taste and enjoy their food again.

“Today, seeing residents enjoy the taste of food again is rewarding for all of us. Involving staff at every phase of the project – from auditing the processes to getting feedback – resulted in a culture change in All Saints Home. Our staff are now more proactive about learning and they have been requesting for more training.”

Ms Pauline Tan  
Director of Nursing, All Saints Home



All Saints Home staff practice oral feeding techniques to better care for clients.

Hand hygiene is the cornerstone of good infection control practice. As healthcare workers use their hands daily to care for clients, the practice of good hand hygiene plays a critical role in controlling and preventing the spread of potentially life-threatening infections.

In a display of commitment to this integral healthcare practice, over 1,000 ILTC healthcare staff from 45 organisations participated in island-wide training sessions leading up to the first-ever ILTC Hand Hygiene celebrations held on 5 May 2011. Several community hospitals and nursing homes also embarked on Hand Hygiene QI projects within their facilities. Consisting of training and education conducted by care staff to their peers, the project included monitoring of hand hygiene compliance, installation of alcohol hand rub at points-of-care and the procurement of suitable alcohol-based hand rub solutions.

## Benefits:

### For patients:

- Improved quality of care because of a reduced risk of infection from healthcare workers and other residents; and
- Reduced cost of care because of lowered risk of infections.

### For staff:

- Reduced risk of infection from residents or other healthcare workers;
- Improved job satisfaction with training and skills development; and
- Sense of ownership to lead and support future improvements and changes.

### For service providers:

- Improved care standards;
- Greater teamwork in developing solutions for the facility; and
- Improved image of the facility.



A nurse getting her hands checked for contamination that is not visible by the naked eye.



Nurses putting their hand hygiene knowledge into practice.



Clean hands!



The apex of quality improvement efforts was the first ILTC Quality Festival held in October 2011. Attended by over 300 healthcare professionals, the Festival aimed to inspire, develop and promote a culture of patient safety and quality improvement within the sector. There was sharing of ideas by both local and overseas speakers, as well as a showcase of successful Quality Improvement (QI) projects by the nursing homes.

Nursing Home Quality Improvement Strategy Map

Key management teams from community hospitals and nursing homes endorsed the Nursing Home Quality Improvement Strategy Map at the first ILTC QI Retreat held on 13 January 2012. The map will guide the nursing home sector in achieving greater heights in patient care.



The ILTC Quality Festival was attended by over 300 healthcare professionals from both the ILTC and acute sector.



AIC CEO Dr Jason Cheah (left) and Associate Professor Sam Scherer (right) sharing their perspectives on quality improvement.

Some other Quality Improvement Projects

Continence Care



- BRIGHT HILL EVERGREEN HOME
- REN CI NURSING HOME
- VILLA FRANCIS HOME FOR THE AGED
- SOCIETY FOR THE AGED SICK

Multi-dose Medication Distribution System



- VILLA FRANCIS HOME FOR THE AGED
- GRACE LODGE
- LING KWANG HOME FOR SENIOR CITIZENS
- ST JOSEPH'S HOME
- BETHANY METHODIST NURSING HOME

Operational Quality



- TAI PEI SOCIAL SERVICE

Pharmaceutical Care Programme

“ It is good to have a professional pharmacist on hand to help guide our medication administration and improve our care for residents. ”

Sister Goh Liang Kim  
Nursing Manager, Tai Pei Social Service

On 16 July 2011, the Pharmaceutical Society of Singapore (PSS) and AIC signed a Memorandum of Understanding to collaborate and enhance pharmaceutical care in nursing homes.

The Pharmaceutical Care Programme (PCP) is a year-long pilot involving six nursing homes. It adopts a multi-pronged approach to increase these homes' capability and effectiveness in managing their residents' medication. These include:

An expanded network of available pharmacists

Community pharmacists from Guardian Health & Beauty, NTUC Unity Healthcare and Watson's Personal Care Stores Pte Ltd, together with National Healthcare Group (NHG) Pharmacy were given on-the-job training to learn how medication is managed in the ILTC sector.

Enhanced pharmaceutical expertise

The nursing homes partnered a community pharmacist to receive monthly and ad-hoc services covering a review of residents' medication, medication reconciliation and a review of the homes' medication management policies and protocols, among other areas.

Conduct of a study on medication systems

A study on the needs, strengths and gaps of participating homes' medication systems was done. Findings from the study were used to develop pharmaceutical-related training for the homes' healthcare staff.

Training

An initial 10-module training session covering topics such as prescription terminology and appropriate drug storage was organised.

The dedication of healthcare professionals to advance their skills in pharmaceutical care and to better manage residents' medication needs will further raise the quality of patient care in nursing homes.

Nursing Home Guide

“ The user-friendly Nursing Home Guide provides a simple checklist to help assess our nursing home's practices and services. We regularly refer to it. ”

Ms Susan Gui  
Director of Nursing, Villa Francis Home for the Aged

A Nursing Home Guide was developed to assist nursing homes in assessing their organisational excellence. The resource has checklists and tips on clinical care and service delivery. Nursing homes can use the guide to assess their current processes and develop innovative ideas for better standards of care and service delivery.



“The Shared Procurement Services saves us time and money – taking away the need to call for quotations and negotiate with suppliers for better prices. More importantly, this project has challenged us to explore alternatives that were not considered.”

Ms Yip Moh Han  
*Administrator, Singapore Christian Home for the Aged*

### Shared Procurement Services

The Shared Procurement Services project aims to lower the costs of medical supplies through aggregated bulk purchases. Currently 30 Voluntary Welfare Organisations in the ILTC sector participate in this project and have saved nearly \$800,000 on products such as adult diapers, milk feeds, hand rubs and sterile dressing sets.

### Ramping up Home Care



With more families preferring to care for their loved ones at home, the number of patients in need of home care is expected to double from over 4,000 today to 10,000 by 2020. Recognising this trend, service providers are working closely with AIC and MOH to raise their capacity and capability to meet the rising demand for home care services.

TOUCH Home Care is an example of a partnering service provider which has worked with AIC to expand its reach of home care services in the community. Supported by AIC and the Centre

for Enabled Living (CEL), TOUCH Home Care has expanded its home care services with a new Centre in Jurong. The Centre opened in November 2011, and will have the capacity to care for some 300 patients. As a result of this service expansion, home-bound patients living in Jurong East and West, and Boon Lay, can now receive both healthcare and social assistance at their doorstep.

Following TOUCH Home Care’s success, AIC plans to collaborate with other service providers to expand home care services across Singapore.

“Project 2012 provides relocating homes with opportunities to expand their capabilities, improve workflow processes, and also the resources to ensure a smoother relocation.”

Ms Patsy Pang  
*Director of Nursing and Operations, Bright Hill Evergreen Home*



From left to right: artist's impression of Singapore Christian Home for the Aged, Villa Francis Home for the Aged and Bright Hill Evergreen Home.

### Project 2012

2012 has been a milestone year for Bright Hill Evergreen Home, Singapore Christian Home for the Aged and Villa Francis Home for the Aged. By mid-2013, these nursing homes will operate out of larger, purpose-built premises with enhanced

work processes and technology to care for some 250 residents. AIC, with support from MOH Holdings (MOHH), is assisting these homes with their relocation and development. The development is being carried out in phases under Project 2012.

#### Phase 1: Review and identify

AIC met each nursing home to:

- Understand the current nursing home operations and processes; and
- Determine the resources needed to support the increased number of residents

#### Phase 2: Consult and recommend

AIC and the three nursing homes appointed a business consultancy firm to:

- Conduct business process re-engineering and recommend areas where processes can be streamlined and/or improved;
- Identify the range of tasks and actions required to support new and improved work processes;
- Explore the redesign of jobs and propose how tasks can be packaged into jobs of higher value; and
- Develop implementation plans to help the nursing homes work towards their desired end goals

#### Phase 3: Implement new operational strategies

The strategies to boost efficiency include:

- Computerising patient data for easy retrieval, dissemination and reduction of errors;
- Automating processes where appropriate, including the use of dishwashers, automated cookers in the kitchen to increase staff productivity; and
- Leveraging on new Information Technology (IT) service delivery.



Bright Vision  
Hospital: Ramping up  
rehabilitation services

Bright Vision Hospital (BVH) has expanded its ward areas. The community hospital is also upgrading its rehabilitation services to cater to the increasing number of rehab patients it receives.

Tapping on the Tote Board Community Healthcare Fund (TBCHF), BVH is building an In-patient Rehabilitation Gym and a replica of a flat with kitchen facilities. One of the newest gym installations is a ceiling-harness system which supports a patient's bodyweight as he practises walking. With this system, the patient will be able to walk safely and confidently to recover faster and in comfort.

The “mock” flat will allow patients to train and regain their basic physical abilities in a simulated home environment. This will give them peace of mind when they transition from the hospital to home.



Bright Vision Hospital staff demonstrating the use of their new ceiling harness system.

The TBCHF, jointly administered by AIC and the Ministry of Health, seeks to enhance the quality of life of patients and improve the affordability and accessibility of healthcare services for the needy and disadvantaged. The Fund supports community-based preventive healthcare programmes by non-profit organisations and also programmes that raise the capacity and capabilities of the ILTC sector.

SINCE  
2009

MORE THAN  
**100** PROJECTS  
SUPPORTED.

TOWARDS  
STRONGER  
— RELATIONSHIPS —

ILTC Night

Close to 900 guests from various ILTC organisations gathered on 24 February 2012 to celebrate the sector's second ILTC Night.

The celebration was held to recognise the dedication and commitment of ILTC staff to the sector and their clients.

Minister for Health, Gan Kim Yong, and Minister of State for Health, Dr Amy Khor, attended the event where a moving tribute was paid to former Chairman of the Ministerial Committee on Ageing (MCA), Lim Boon Heng. Audiences were also entertained by staff from ILTC organisations who showcased their talent through song and dance performances.



Mr Lim Boon Heng (left) receiving a token of appreciation from Health Minister Gan Kim Yong (right) for his contributions to improving care for the elderly.





## Ministerial Visits to ILTC Institutions

Beginning in November 2011, AIC organised a series of ministerial visits to ILTC institutions for Minister for Health, Gan Kim Yong, and Minister of State for Health, Dr Amy Khor, to engage and listen to service providers in the ILTC sector. Some of the organisations visited include AWWA READYCARE Centre, Bedok Multiservice Centre, Econ Medicare Centre (Upper East Coast) and New Horizon Centre (Tampines).



Health Minister Gan Kim Yong speaking to staff from Assisi Hospice.



Health Minister Gan Kim Yong interacting with patients from All Saints Home.

## Engaging GPs



In line with the implementation of MOH's primary care master plan, AIC has been engaging the General Practitioners (GPs) in the private sector, to seek feedback and establish an ongoing dialogue. One of the engagement efforts was the setting up of an advisory panel comprising doctors, opinion leaders and industry players. Their feedback has helped shape the development plans for primary care sector and initiatives such as the Primary Care Pages and the Community Health Assist Scheme (CHAS). Through ongoing engagement, more GPs have joined CHAS as participating clinics. The CHAS clinic offers subsidies for medical and dental treatment to Health Assist card holders.

## Community Mental Health Forum

**Mental health is more than the absence of mental disorders.**

It is a fundamental part of a person's health and state of well-being. Yet, it is often ignored because of a lack of understanding, misconceptions, discrimination and stigma.

To better understand the mental health landscape, AIC engaged clinician leaders and Directors of Operations of Restructured Hospitals to review the current and future plans for the community mental health sector.

A series of focus groups and forums was held in 2011, addressing issues such as the challenges faced in providing mental health services, and how to best improve the care for both patients and their caregivers. The discussions culminated in a Community Mental Health Forum on 28 November 2011, which brought together representatives from the health and social care sectors.

Through the sessions, a plan was laid out to develop an integrated, and person-centred care network to support mental health patients and caregivers.

The feedback and suggestions received also helped to shape various community mental health initiatives. These includes the building up of mental health capabilities in the community through Community



Clinician leaders and Directors of Operations of Restructured Hospitals discussing about the community mental health sector.

Resource, Engagement and Support Teams (CREST) and Community Intervention Teams (COMIT).

CREST serves as a community safety network for persons with mental illness or suspected with mental illness risks. COMIT provides intervention, counseling and support to keep the clients well and productive in the community.

## Regional Health Systems Integration

**The focus of Regional Health System (RHS) is to integrate and provide seamless care for patients.**

To achieve this, Restructured Hospitals have increasingly partnered community-based service providers to develop programmes that integrate and enhance the

delivery of care in outpatient settings. Many of these initiatives received seed funds from AIC, and these programmes have enhanced the service providers' capabilities, enabled the right placement of patients, and strengthened access to appropriate care. There are currently 11 programmes being put in place by Restructured Hospitals.

# JOURNEY WITH OUR EMPLOYEES

AIC succeeds through our people and our belief that as a team, we can make a positive difference. Our employees' journey begins from their first day with us. Through our hundred-day Personal Induction Experience (P.I.E.) programme, newbies learn about the Singapore healthcare system, our mission and roles, while acquiring and embracing our core values of Professionalism, Respect, Innovation, Zest and Empathy (PRIZE).





# WELCOME

— TO AIC —

We dedicate our best to support our clients in their care journey; bring diverse perspectives, knowledge and skills to partner healthcare providers in their growth journey; and initiate meaningful collaborations with a range of healthcare providers for a better healthcare system.

## Personal Induction Experience (P.I.E.)

“P.I.E. has enabled me to ease into AIC’s culture within a short period and gain a better understanding of the organisation’s work in the ILTC sector.”

We know that pioneering new ground in healthcare, building strong and lasting partnerships and co-creating an integrated healthcare system with our stakeholders are not simple propositions. At AIC, we want to help our people get up the steep learning curve as quickly as possible. The Personal Induction Experience (P.I.E.) programme is thus launched to provide structured learning for our new employees during their first 100 days at AIC. P.I.E. enables our new employees to understand how the Singapore healthcare system is evolving, and AIC’s mission and roles in helping to integrate care for our clients. Visits to ILTC service providers to understand the aspirations and challenges of our partners expose new employees to the meaning of the work we do. They also get to build peer networks and experience the AIC culture through the Zest Fiesta, an induction programme about AIC’s core values – Professionalism, Respect, Innovation, Zest and Empathy.

Jeremy Lee  
Executive, People Excellence Department



# BUILDING

— CAPABILITIES —

“Although I have acquired management skills during the course of my career, the structured competency framework enables me to further enhance my skillset and improve work performance.”

Ms Ng Toon Mae  
Assistant Director, Community Care Development Division

Our people have a wide range of opportunities to learn and grow with AIC. The AIC Competency Framework helps guide our people to systematically gain new knowledge and skills and practise them in their daily work.

The AIC Managers Development Roadmap, a 9-module series specially designed for AIC Managers, raises the competencies of our Managers in People Management, Strategic Thinking and Leading by AIC Core Values. A Development Roadmap for AIC Executives is being planned for 2012.



## Training Hours

IN 2011

{ AIC EMPLOYEES ATTAINED AN AVERAGE OF **76.32** TRAINING HOURS. }



“ I was delighted to be given the opportunity to pursue my postgraduate study in Public Health and saw this sponsorship as a form of recognition of my good work by AIC. Through the course, I gained a better understanding of our healthcare system and learnt that a seemingly complex problem can be managed with a structured framework and logic. This is a valuable lesson I constantly remind myself through the course of my work. Now back at AIC, I find myself playing a variety of roles in different projects. From being a project manager to a project evaluator, the exposure to projects of different nature has expanded my range of knowledge and skills. ”

**Dr Patsy Chow**  
*Manager, Care Integration Division  
Recipient of AIC Study Award*

We believe in investing time and resources to raise our employees’ capabilities and professional qualifications. There are opportunities for them to pursue both part-time and full-time courses in Singapore or overseas, sponsored by AIC.



Monthly Learning Forums conducted by both external and internal speakers.

**Learning opportunities abound in AIC**

Every month, a Learning Forum is held for employees to learn more about the healthcare landscape. Speakers from various fields including psychiatrists and academic professionals are invited to share their expertise and experiences.

In the past year, we had the privilege of hearing from experts from the Saw Swee Hock School of Public Health, Duke-NUS Graduate Medical School and National University of Singapore among others. Our employees also shared their studies and experiences on themes as diverse as Singapore’s healthcare landscape, role models for personal and professional development, and their study trips.

# ENGAGING

## — OUR WORKFORCE —

To promote a fun and healthy workplace and a sense of community within AIC, ClubZ, a committee of AIC employees, organises regular recreational activities for all.

Through their efforts, employees have opportunities to broaden their interests and bond with fellow colleagues outside of work.



Having fun during AIC's Family Day.



Celebrating the different festivities in AIC.



Picking up fun skills such as balloon sculpting.



Volunteering our services in the community.

PRIZE, an online monthly newsletter keeps employees informed of the happenings in AIC and applauds the hard work of our people as they demonstrate the core values through their projects. In August 2011, the newsletter was revamped to incorporate new interactive features that enliven the engagement experience for our employees.

“ I always look forward to the PRIZE newsletter every month. I find it informative & interesting! I enjoy reading about the newcomers and different events in AIC. All these remind me that I am still part of AIC even though I am based outside of office. ”

**Suvian Toh**  
*Care Coordinator, Care Integration Division  
Based at National University Hospital (Singapore)*



CEO Dr Jason Cheah addressing our employees at one of the Monthly Management Forums.

The Senior Management team in AIC believes in frequent interactions with employees and listening to their suggestions to make AIC a better place. The Monthly Management Forum updates employees on organisational-level issues and developments, and provides an opportunity for sharing and dialogue. Employees also get opportunities to interact (and have tea) with Senior Management to provide their inputs on improving AIC, and how they can help employees be their best.



WE WOULD LIKE TO THANK THE FOLLOWING STAKEHOLDERS AND PARTNERS FOR THEIR CONTRIBUTION TOWARDS STRENGTHENING THE PRIMARY AND COMMUNITY CARE SECTORS.

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University Medicine Cluster,  
National University Health System

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Home Nursing Foundation  
May 2011 - Dec 2011

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Kheng Hock  
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Department of Family Medicine  
and Continuing Care,  
Singapore General Hospital

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Department of Geriatric Medicine,  
Changi General Hospital

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Community Geriatrics  
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Department of Geriatrics,  
Changi General Hospital

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SENIOR MANAGEMENT



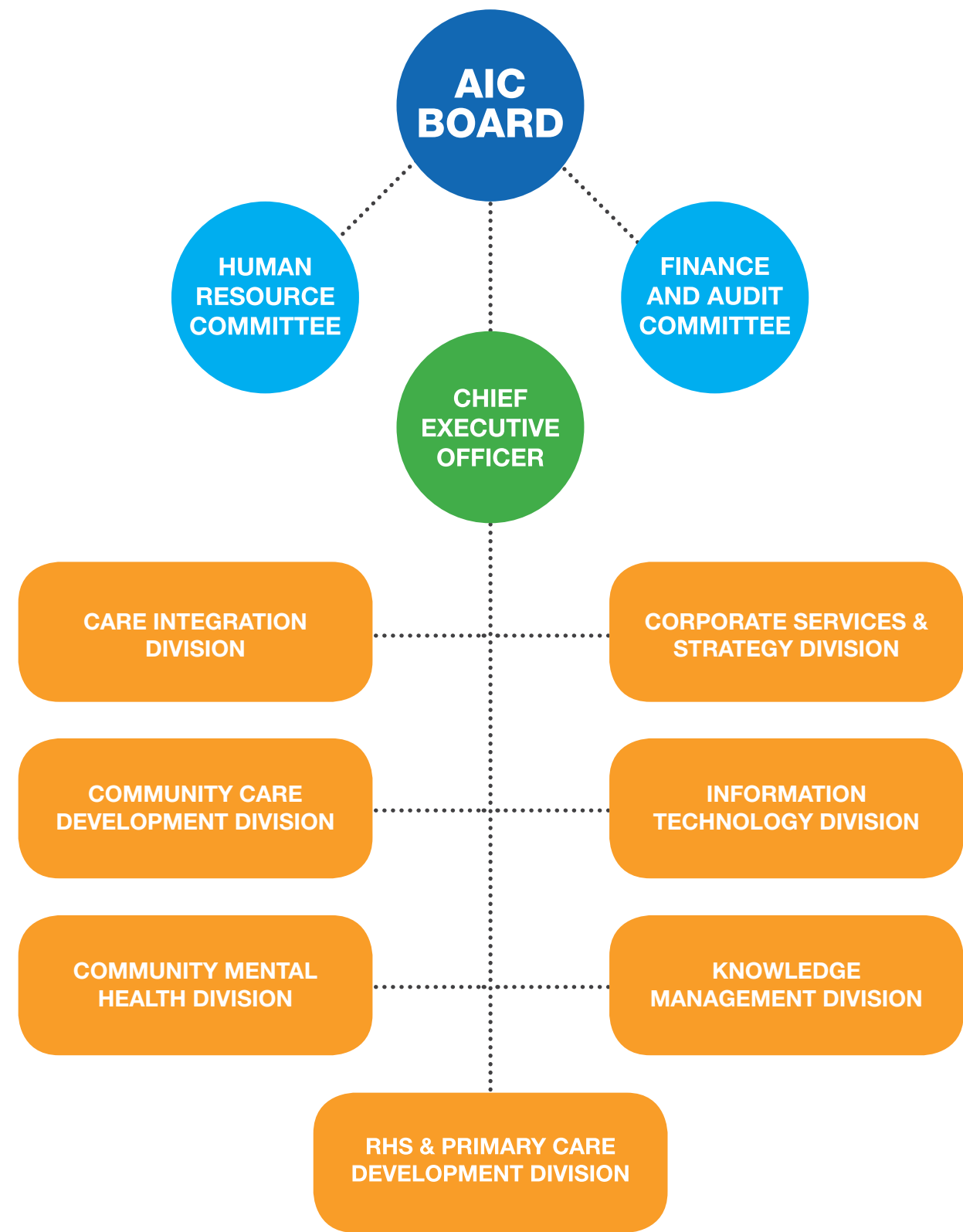
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*Head, Research, Health  
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OUR ORGANISATION



- **Care Integration Division**  
The Care Integration Division oversees the transition of patients across different levels of care through case and referral management and the development of new clinical services in the community care sector. It coordinates care for patients and caregivers through assessment of patient’s needs and matching of the right services to the right patients.
- **Community Care Development Division**  
The Community Care Development Division, in partnership with service providers, works actively towards building an excellent community healthcare sector through initiatives that enhance its workforce and organisational capabilities, improving productivity and operational efficiencies.
- **Community Mental Health Division**  
The Community Mental Health Division works with partners to strengthen and build up the range of community mental health support mechanisms and services to enable person-centred integrated care to be delivered in the community and provide support for patients and their family members.
- **Corporate Services and Strategy Division**  
The Corporate Services and Strategy Division supports AIC and divisions to achieve their desired outcomes, objectives and goals and the ILTC sector on leadership development. The division comprises Corporate Development, Corporate and Marketing Communications, Finance and Office Administration, Human Resources, and ILTC People Excellence.
- **Information Technology Division**  
The Information Technology Division enables AIC and its primary care and ILTC partners to use the efficiency and analytical capabilities of Information Technology to achieve their strategic goals and to operate as effectively as possible.
- **Knowledge Management Division**  
The Knowledge Management Division builds up information and knowledge resources for AIC and the community care sector to guide policy, planning and action. The division also develops strategies and plans for new technology development to benefit the community and primary care sectors. It continues to work with industry partners to embrace innovation and drive growth in these sectors.
- **Regional Health Systems and Primary Care Development Division**  
The Regional Health Systems and Primary Care Development Division works with partners to jointly create a more seamless and integrated healthcare system through facilitating integration projects involving partners across the primary, acute, ILTC and home care sectors, and the development of primary and home care sectors.



## Central District

- C1 ANG MO KIO GRC
- C2 BISHAN - TOA PAYOH GRC
- C3 MOULMEIN - KALLANG GRC
- C4 RADIN MAS SMC
- C5 SENGKANG WEST SMC
- C6 TANJONG PAGAR GRC
- C7 WHAMPOA SMC

## North East District

- NE1 ALJUNIED GRC
- NE2 HOUGANG SMC
- NE3 PASIR RIS - PUNGGOL GRC
- NE4 PUNGGOL EAST SMC
- NE5 TAMPINES GRC

## North West District

- NW1 BUKIT PANJANG SMC
- NW2 HOLLAND - BUKIT TIMAH GRC
- NW3 NEE SOON GRC
- NW4 SEMBAWANG GRC

## South East District

- SE1 EAST COAST GRC
- SE2 JOO CHIAT SMC
- SE3 MARINE PARADE GRC
- SE4 MOUNTBATTEN SMC
- SE5 POTONG PASIR SMC

## South West District

- SW1 CHUA CHU KANG GRC
- SW2 HONG KAH NORTH SMC
- SW3 JURONG GRC
- SW4 PIONEER SMC
- SW5 WEST COAST GRC
- SW6 YUHUA SMC

# INTERMEDIATE AND LONG-TERM CARE (ILTC) SERVICES



For more information on the service providers, please visit [silverpages.aic.sg](http://silverpages.aic.sg)

## Community Hospitals 社区医院

- C1** Ang Mo Kio - Thye Hua Kwan Hospital  
太和观医院  
17 Ang Mo Kio Avenue 9 S569766  
Tel: 6453 8033 [www.amkh.org.sg](http://www.amkh.org.sg)
- C1** Bright Vision Hospital  
观明综合医院  
5 Lorong Napiri S547530  
Tel: 6248 5755 [www.bvh.org.sg](http://www.bvh.org.sg)
- C3** Ren Ci Hospital  
仁慈社区医院  
71 Irrawaddy Road S329562  
Tel: 6385 0288 [www.renci.org.sg](http://www.renci.org.sg)
- SE1** St Andrew's Community Hospital  
圣安德烈社区医院  
8 Simei Street 3 S529895  
Tel: 6586 1000 [www.sach.org.sg](http://www.sach.org.sg)
- SW3** St Luke's Hospital  
圣路加医院  
2 Bukit Batok Street 11 S659674  
Tel: 6563 2281 / 6567 0708 [www.slh.org.sg](http://www.slh.org.sg)

## Day Care Centre for Seniors (Social) with Rehabilitation Services 年长者日间护理中心（社区）－ 具备康复服务

- SE4** NTUC Eldercare Co-operative Ltd –  
Silver Circle (Dakota)  
职总乐龄银之圈日间托管中心 (达科达)  
Blk 62 Dakota Crescent #01-315 S390062  
Tel: 6346 5530 [www.ntuceldercare.org.sg](http://www.ntuceldercare.org.sg)
- SE1** NTUC Eldercare Co-operative Ltd –  
Silver Circle (Fengshan)  
职总乐龄银之圈日间托管中心 (凤山)  
Blk 91 Bedok North Street 4 #01-1527 S460091  
Tel: 6242 8160 [www.ntuceldercare.org.sg](http://www.ntuceldercare.org.sg)

## Day Rehabilitation Centres 日间康复中心

- NW4** Adventist Nursing & Rehabilitation Centre  
福临康复中心  
Blk 6 Marsiling Drive #01-96 S730006  
Tel: 6368 8401 [www.anrc.org.sg](http://www.anrc.org.sg)
- C3** AgeWell ARTSZ  
530 Balestier Road #01-04 Monville Mansion  
S329857  
Tel: 6258 9792 [www.agewell.com.sg](http://www.agewell.com.sg)
- NE5** All Saints Home (Tampines)  
众圣之家 (淡滨尼)  
11 Tampines Street 44 S529123  
Tel: 6788 2345 [www.allsaintshome.org.sg](http://www.allsaintshome.org.sg)
- C1** Ang Mo Kio - Thye Hua Kwan Hospital  
太和观医院  
17 Ang Mo Kio Avenue 9 S569766  
Tel: 6450 6150 [www.amkh.org.sg](http://www.amkh.org.sg)
- C6** Apex Day Rehabilitation Centre for Elderly  
艾柏士日间乐龄中心  
Blk 119 Bukit Merah View #01-85 S152119  
Tel: 6273 4510 / 6271 9685 [www.apex.rehab.org.sg](http://www.apex.rehab.org.sg)
- C1** Asian Women's Welfare Association (AWWA)  
Readycare Centre  
亚洲妇女福利协会  
Blk 123 Ang Mo Kio Avenue 6 #01-4035 S560123  
Tel: 6552 3955 [www.awwa.org.sg](http://www.awwa.org.sg)
- C1** Bright Vision Hospital  
观明综合医院  
5 Lorong Napiri S547530  
Tel: 6248 5755 [www.bvh.org.sg](http://www.bvh.org.sg)
- C2** Eden Rehabilitation Centre  
忆恩康复中心  
95 Toa Payoh Lorong 4 #02-66 S310095  
Tel: 6252 3245 / 9825 5393
- SW4** Handicaps Welfare Association (Jurong)  
残障人士福利协会 (裕廊)  
1 Jurong West Central 2 #04-03  
Jurong Point Shopping Centre S648886  
Tel: 6790 8636 / 6790 9029 [www.hwa.org.sg](http://www.hwa.org.sg)

- C7** Handicaps Welfare Association (Whampoa)  
残障人士福利协会 (黄埔)  
16 Whampoa Drive S327725  
Tel: 6254 3006 [www.hwa.org.sg](http://www.hwa.org.sg)
- SW5** Jamiyah Nursing Home  
130 West Coast Drive S127444  
Tel: 6776 8575 [www.jamiyah.org.sg](http://www.jamiyah.org.sg)
- C7** Kwong Wai Shiu Hospital  
广惠肇留医院  
705 Serangoon Road S328127  
Tel: 6422 1240 [www.kwsh.org.sg](http://www.kwsh.org.sg)
- NE1** Ling Kwang Home for Senior Citizens -  
Day Care Centre for the Elderly  
灵光爱老院 (康复中心)  
156 Serangoon Garden Way S556055  
Tel: 6287 5466 [www.iccc.org.sg/lkh/html](http://www.iccc.org.sg/lkh/html)
- NW4** Man Fut Tong Nursing Home  
万佛堂疗养院  
20 Woodlands Street 82 S738507  
Tel: 3157 1151 [www.mft.org.sg](http://www.mft.org.sg)
- SE1** Marine Parade - Aspiration for Elderly Lodge  
马林百列愿行日间长者居  
Blk 201 Bedok North Street 1 #01-545/557 S460201  
Tel: 6445 5518 [www.fooohai.org](http://www.fooohai.org)
- SE3** Marine Parade - Foo Hai Elderly Lodge  
马林百列福海日间长者居  
Blk 4 Marine Terrace #01-318 S440004  
Tel: 6445 3733 [www.fooohai.org](http://www.fooohai.org)
- NE5** Metta Day Rehabilitation Centre for the Elderly  
慈光乐龄日间康复中心  
Blk 296 Tampines Street 22 #01-526 S520296  
Tel: 6789 5951 [www.metta.org.sg](http://www.metta.org.sg)
- NE5** New Horizon Centre (Tampines)  
新曙光护理中心 (淡滨尼)  
Blk 362 Tampines Street 34 #01-377 S520362  
Tel: 6786 5373 [www.alz.org.sg](http://www.alz.org.sg)
- SE3** Muhammadiyah Health &  
Day Care for Senior Citizens  
Blk 10 Eunos Crescent #01-2711 S400010  
Tel: 6741 4779 [www.muhammadiyah.org.sg](http://www.muhammadiyah.org.sg)