

— 2013 YEARBOOK —

COMING TOGETHER...





...equals better Integrated Care :) ♥

Enabling our clients to achieve the best care outcomes is the core of what we do at the Agency for Integrated Care, AIC. With **health and social care coming together** in 2013, our elderly clients now enjoy comprehensive care while their caregivers are well supported in the community. The integration is a step towards a future where people will have easy access to a whole range of inter-connected care options, both social and health, and be enabled to live well and age gracefully in any care setting they choose as their preferred 'home'.

This Yearbook highlights the work of AIC and our partners from 1 January 2013 to 31 December 2013.



OUR VISION

A vibrant care community enabling people to live well and age gracefully.

OUR MISSION

To enable our clients to achieve their best care outcomes, we:

- Improve access to appropriate care and support clients and their caregivers
- Grow and develop Primary and Community Care sectors
- Transform the Care Community to support ageing-in-place

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MESSAGE FROM CHAIRMAN

2013 was another eventful year for AIC. A significant move that the Government took to serve Singaporean seniors better in their care needs was to **bring together the aged care functions of the Centre for Enabled Living (CEL) with AIC.**

We were excited to be given this expanded mandate as it paved the way for aged care providers to work with AIC as the “single agency” to coordinate and seamlessly deliver holistic aged care services for our seniors and their caregivers. The integration of health and social care services in April 2013 opened up many new opportunities for AIC, in partnership with its care providers and stakeholders, to build new capabilities, deepen ties and widen networks. In particular, we warmly welcomed our new colleagues and our new Board members from CEL - Professor Chong Tow Chong, Mdm Chua Foo Yong, Mr Goh Chye Boon, Mr Gregory Vijayendran and Mr Kwok Wui San – who brought with them valuable knowledge, insights and experiences with the social care sector. We have benefitted from their ideas on how to integrate health and social care services, taking a seniors-first clients approach.



Dr JENNIFER LEE
CHAIRMAN

With AIC’s expanded roles, the Board, Management and employees felt it was timely to review AIC’s Mission and create a new Vision - one that articulates our long-term aspirations for our organisation and those of our clients and stakeholders. Our new Vision statement - “A vibrant care community enabling people to live well and age gracefully” reflects the desires of our clients who prefer to live and age well at home, close to their families and friends and remain connected in the community. Clearly, this Vision can only be achieved with the continued support from all our partners – amongst them care providers and their staff, community partners, grassroots organisations, government agencies, and caregivers working closely and alongside one another for the benefit of our clients.

AIC’s growth and achievements are only possible with the passion and commitment of our partners. I would like to especially recognise our two pioneering Board Members, Dr Ang Peng Chye and Mr Benedict Cheong, who stepped down in 2013. Thank you for your excellent support in helping AIC lay the foundation for a Community Care sector we can be proud of. I would

also like to commend all AIC employees for your hard work, dedication and zest. I know many of you took on multiple roles and worked tirelessly to support our clients and stakeholders. We have accomplished much together and there is much more to do. I look forward to embarking on the new journey of realising our vision, together.





MESSAGE FROM CEO

Of the many Budget announcements made in 2013, the one which created the greatest excitement for us was the **integration of the aged care functions of the Centre for Enabled Living (CEL) with AIC.**

The integration was a natural step in our continuous drive to improve the way we plan and organise care services around our clients and was widely welcomed by our partners and stakeholders. By integrating healthcare and social care services “under one roof”, AIC could develop a much more comprehensive view of the evolving needs of our seniors and develop more holistic care models and services to address them.

We welcomed our new colleagues from CEL into the AIC family in April 2013. By July, AIC completed the integration to serve as the single “touch point” for care services for our seniors and their caregivers. What this meant is that our clients, such as Mr Petha Perumal Murugajahal, can more easily access the range of health and social services available to him in the community. Mr Petha is 72, lives alone and desires to stay in his own home independently. Unfortunately he suffers from dementia, diabetes, hypertension and heart problem which make independent living challenging. While he was being assisted by AIC’s Community Resource, Engagement and Support Team for his dementia, we also quickly linked him to other services that remind him to take his medications and go for his medical appointments so that his chronic conditions are well managed. He also agreed to having a carer from our Caring Assistance from Neighbours (CAN) programme drop by for social and befriending activities. Mr Petha loves his nutritious spicy food which is now delivered to him at home through the Meals on Wheels programme.

AIC also took over the administration of the Caregivers Training Grant and the Foreign Domestic Worker Grant, which provided us new resources and schemes



Dr JASON CHEAH
CEO

to support caregivers to better care for their loved ones. With our combined knowledge and resources, we enhanced information support and made health and social care resources easily accessible through our one stop portal, Singapore Silver Pages, and AIC’s Eldercare Info Corners at 46 community touch points. For seniors and caregivers who prefer to talk to someone in person about their care options, they can visit AICare Hub at City Square Mall to obtain relevant information, be referred to appropriate services, and apply for aged care services.

The integration also enabled AIC to more holistically develop new care models and services. Together with the Ministry of Health (MOH), we developed the care model for Senior Care Centres (SCCs), which brings together social day care, community rehabilitation, and nursing or dementia care services. To date, we have four SCCs supporting our seniors to live well in the community, and we have plans to develop more SCCs islandwide by 2020. We introduced wellness programmes with our Nursing Home partners and piloted new home care packages that included both health and social care services. These are small but important steps to developing and organising services around the needs of our clients to enable them to lead active lives in the community.

The expansion of the Community Health Assist Scheme (CHAS) and Seniors’ Mobility and Enabling Fund (SMF) also meant that more can access such schemes to remain active and well in the community. In this Yearbook, we have included many heart-warming stories of those who have benefitted. I am

sure their personal experiences and stories will inspire many who are caring for their loved ones.

As the aged care sector grows and develops, AIC has put together a range of programmes for our partners. These range from scholarships, training programmes and productivity schemes to support service providers in manpower development, and to create, expand, and improve their facilities and range of services to better serve our seniors. I am also especially grateful for the support of our Nursing Home partners in developing the Enhanced Nursing Home Standards (ENHS) which signals the commitment of the Nursing Home sector to continuous improvement and quality of care.

These efforts to develop and integrate care services well for our seniors will be a multi-year effort. The new AIC Vision underscores AIC’s commitment to work closely with our clients, partners and the health system to help our seniors stay active and healthy and live and age in the community. I thank our partners for their commitment to quality and service to our clients, the AIC Board for your guidance, insights and networks you avail to AIC, and every AIC employee for your dedication and passion to develop a better AIC and Community Care. I hope you will enjoy reading this Yearbook, which documents our journey to co-create a vibrant care community enabling people to live well and age gracefully.





A GLIMPSE INTO 2013

JANUARY



- * Third Singapore Programme for Integrated Care for the Elderly (SPICE) starts services in Ling Kwang Home for Senior Citizens.
- * Case Management Society of Singapore (CMSS) launched. A new platform to share best practices on providing seamless and person-centred care.
- * Opening of Sree Narayana Mission Home (Singapore)'s Multi-Service Centre.

APRIL



- * Aged care functions of Centre for Enabled Living integrated with AIC to provide one-stop service for referrals and information on health and social care services for seniors.
- Caregivers Training Grant (CTG), Foreign Domestic Worker (FDW) Grant and Foreign Domestic Worker Levy Concession for Persons with Disabilities (FDWLC) are now administered by AIC.

MAY



- * Roll out of Nursing Home Respite Care (NHRC) programme which provides short-term respite care services at a nursing home for families and caregivers.

JULY



- * Senior's Mobility Fund enhanced to cover more assistive devices and subsidies for transport and medical consumables. Renamed Seniors' Mobility and Enabling Fund (SMF).



- * Enhanced Singapore Silver Pages (SSP) launched to empower caregivers with information to help them better care for elderly loved ones.



AUGUST



- * Caring Assistance from Neighbours (CAN) programme launched. Seniors volunteer to look after vulnerable elderly neighbours.
- * mosAIC, AIC's newsletter for the ILTC sector, awarded the US APEX Award for Publication Excellence – "Excellence in Newsletter – Electronic and Web".
- * Enhancement of Community Health Assist Scheme (CHAS) announced.
- * Two new Community Resource, Engagement and Support Teams (CREST) formed to increase public awareness on mental health.

SEPTEMBER



- * Roll out of 'Partner a Nursing Home' programme with Singapore Chefs Association to improve nutrition and quality of food services at nursing homes.
- * Intermediate and Long-Term Care (ILTC) Quality Festival 2013 included social care providers and their quality improvement projects for the first time.



OCTOBER



- * Partnered Singapore Polytechnic and Temasek Cares to develop a range of technology-assisted equipment to improve rehabilitation of seniors and the disabled.
- * ILTCareers portal launched to connect jobseekers to careers in the Community Care sector.
- * First ILTC Manpower Development Awards Ceremony.
- * Co-hosted the "Enrich Your Mind" learning festival with Health Promotion Board to promote mental well-being.
- * Opening of Bright Hill Evergreen Home.

NOVEMBER



- * More than 1,000 social and healthcare practitioners attended AIC's first World Congress on Integrated Care 2013.

DECEMBER



- * First collaboration with Singapore National Eye Centre to provide ophthalmic skills training to improve eye care for the elderly in community-based care facilities.



COMING TOGETHER... we

FEEL WARMER



Eldercare facilities and services are now ever more present in every community to help seniors live well and age gracefully, in their own homes and near their loved ones. Together with support from family members, caregivers, friends, family doctors, home nurses, community grassroots and volunteers, AIC seeks ways to co-create a care community that is inclusive, vibrant and full of warmth.



Thanks to **Caregivers Training Grant**, I can attend courses to be a better caregiver.



Seniors' Mobility and Enabling Fund provides me with assistive devices to do what I enjoy in life.



Nursing Home Respite Care provides me a short break from caregiving.



I can be cared for in the community now with **Assistance from Neighbours**.



Foreign Domestic Worker Grant

enables us to afford a domestic help to look after mum.



I can receive **professional care** at home.



Community Health Assist Scheme more can qualify!



We get eldercare and caregiving information on **SINGAPORE SILVER PAGES**. I care to know.



I CARE to know more about caregiving.





AGEING IN COMMUNITY - FINANCIAL ASSISTANCE

CUT TO THE CHAS

Previously when Mr Mohamed Din Bin Rahmat or his wife was sick, they would pop one or two Panadol tablets and try to get some rest to recover. They avoided going to the General Practitioner (GP) near their home to save on costs.



Mr Mohamed Din Bin Rahmat and family.



“We would only go and see the doctor if we didn’t get better after a few days and we thought we needed antibiotics,” said Mdm Zainon, 51.

Then, their eldest daughter, Ms Siti Farhana, 28, came to know about the Community Health Assist Scheme (CHAS). And the elderly couple signed up for it.

Mr Mohamed said, “These days when we are sick, we can afford to see the doctor at the GP clinic nearby. With the subsidy under CHAS, we now pay only \$18.” He has since been telling all his neighbours, relatives and friends to sign up for CHAS.

400,000

middle and low income Singaporeans can enjoy subsidies at CHAS clinics as at end December 2013! **MORE WILL QUALIFY IN 2014.**

COMMUNITY HEALTH ASSIST SCHEME

ENHANCED

CHAS enhancement was announced on 29 August 2013. CHAS provides accessible and affordable medical and dental care at participating CHAS clinics located islandwide.



FROM 1 JANUARY 2014...



Singapore Citizens of **ALL AGES CAN QUALIFY FOR CHAS** if they meet the household monthly income per person criterion of \$1,800 or less, or if the annual value of their residence is \$21,000 and below for households with no income.



The list of chronic conditions will also be **EXPANDED TO COVER ANOTHER FIVE**, bringing the total number to 15.



Those who receive Health Promotion Board’s (HPB) invitation will **RECEIVE SUBSIDIES** for the recommended screening tests under its Integrated Screening Programme (ISP).



ENJOY SUBSIDIES for their doctor’s consultation charges for screening and related follow-ups at CHAS clinics, up to two times per calendar year.



AGEING IN COMMUNITY - FINANCIAL ASSISTANCE

MOBILITY IS PRICELESS

For the frail elderly, there are gadgets available that can make their lives happier, easier, more comfortable and safer. And these have been made more affordable!

In 92-year-old Mr Yasmuddin Bin Rasul's case, he needed a shower chair.

Mr Yasmuddin's case worker from Goodlife! had noticed that his wife Mdm Rahmah Bte Abdul Gani, 83, struggled every day to give him his daily bath with him sitting on the toilet bowl. Once while doing so, Mr Yasmuddin fell and hurt himself. The case worker thought that if they had a shower chair, she could place it just inside the bathroom near the door so that Mr Yasmuddin and Mdm Rahmah can both be better supported during Mr Yasmuddin's shower.

The case worker put in an application for them to get a subsidy from the Seniors' Mobility and Enabling

Fund (SMF) to purchase the shower chair. As a result, Mr Yasmuddin only needed to pay \$6 for the \$60 chair after subsidy. And Goodlife! decided to help pay the \$6. The elderly couple was grateful that they did not have to fork out a single cent.

"Now my husband can be seated comfortably on the chair which is padded and has a back rest that he can lean against. Also, the shower chair makes it easier and safer for me to give him his daily bath," said Mdm Rahmah.

SENIORS' MOBILITY AND ENABLING FUND

ENHANCED

The \$50 million enhanced SMF rolled out in July 2013 provides holistic and comprehensive support for seniors to help them remain mobile and live independently in the community.

MORE THAN **5,000**

seniors have benefitted from subsidies since the SMF was enhanced in July 2013.



MORE BENEFITS...



WIDER RANGE OF ASSISTIVE DEVICES

More assistive devices such as motorised wheelchairs, shower chairs, hospital beds, and hearing aids are available.



TRANSPORT SUBSIDIES EXTENDED TO MORE SENIORS

Besides seniors receiving active rehabilitation at day rehabilitation centres, transport subsidies are now available to seniors receiving care at dementia day care centres and renal dialysis centres funded by the Ministry of Health.



NEW SUBSIDIES FOR HOME HEALTH CARE PRODUCTS

Frail seniors receiving home-based healthcare services, and patients under AIC's SPICE can get subsidies for home healthcare products such as diapers, milk feeds, catheters and various types of wound dressings.



140 MORE PLACES TO APPLY

Access points across Singapore to process and approve SMF applications.



SIMPLIFIED ASSESSMENT FOR SMF DEVICES

Seniors living in 3-room HDB flats or smaller and applying for devices that cost below \$500 will automatically qualify for the 90% subsidy.



Mr Yasmuddin Bin Rasul.



AGEING IN COMMUNITY - CARE SERVICES

HOME IS WHERE MY HEART IS

Mr Chan Chong How, 76, a stroke patient, attends the SPICE programme at Ling Kwang Home for Senior Citizens daily for his rehabilitation therapy. At the end of the day, he returns to the comfort of his own home and spends time with loved ones.

This arrangement is made possible with SPICE – the Singapore Programme for Integrated Care for the Elderly – which enables the frail elderly to attend a specialised day care centre to get the higher level of care that they need.

“I’m glad that I get to go home each day and be with my family,” said Mr Chan who had a stroke last March. He spent several months at Ang Mo Kio-Thye Hua Kwan Hospital where he underwent rehabilitation therapy before he was discharged.

Mr Chan, a retired banker, cannot wait to walk independently again and he gets over-zealous in his efforts to do so.

“After one month here, I can now walk some distance with the support of my therapist and walking frame,” said Mr Chan proudly. He is very happy with the progress that he is making since he was enrolled in SPICE last June. Apart from the therapy, Mr Chan who also has a heart condition and suffers from sleep apnoea gets to consult the doctor who comes to the centre every week.

Every day from Monday to Friday, Mr Chan spends his day from 9am to 4pm at SPICE@Ling Kwang Home Integrated Day Care Centre. In between his therapy sessions, he reads and takes a short nap after lunch.

“The staff here are nice. They are also very cheerful and enjoy teasing each other. They liven up the place with their happy bantering!” added Mr Chan.

SINGAPORE PROGRAMME FOR INTEGRATED CARE FOR THE ELDERLY

Started in 2010, SPICE provides centre and home-based services for the frail elderly who need a higher level of care such as nursing and medical care, occupational and physiotherapy, counselling and training for caregivers. With SPICE, elderly can continue to live at home instead of a nursing home.



Ling Kwang Home for Senior Citizens offers SPICE.



MORE CENTRES RUNNING SPICE AT DIFFERENT REGIONS ISLANDWIDE

- Peacehaven Bedok Multi-Service Centre
- Tembusu Rehab and Day Care Centre (Jurong)

NEW IN 2013

- Ling Kwang Home for Senior Citizens (Serangoon Gardens)

NEW IN 2013

- Tembusu Eldercare Centre (Eunos)

FROM 2014

- Peacehaven Nursing Home (Upper Changi Road North)

FROM 2014

- Sunshine Welfare Action Mission, SWAMI (Sembawang Walk)

CARE FACILITIES IN THE COMMUNITY FOR SENIORS...

NEW

COMMUNITY HEALTH CENTRES (CHC)

Provides support services like diabetic retinal photography, and diabetic foot screening to complement the clinical care by General Practitioners (GPs) in the management of chronic diseases.

NEW

SENIOR CARE CENTRES (SCC)

One-stop centres integrating day care, community rehabilitation and nursing or dementia care.





AGEING IN COMMUNITY - CARE SUPPORT

THE “CAN-DO” COMMUNITY

Mdm Mary Chau, 60, will never forget the help she received from a neighbour for several months when she had a stroke 13 years ago. Grateful for that, she signed up to be a volunteer under the Caring Assistance from Neighbours (CAN) programme.

She now looks out for the frail and vulnerable elderly who stays alone in her neighbourhood, one of whom is Mr Petha Perumal Murugajahal, 72, who lost the use of his legs following an accident at a construction site. He also has dementia, diabetes, hypertension, and heart problem.

He looks forward to Mary's visits, knocking at his door twice a day to remind him about his medication. Sometimes, she will also bring him snacks and ensures that he goes for his medical appointments.

Mary said, “I will always remember my neighbour helping me when I was ill. Now that I'm well, I want to help my neighbours as my neighbour had helped me back then!”

Apart from Mr Murugajahal, Mary provides care to four others living in her own block. She leaves her home at 8am every morning to check on them and then repeats the routine again in the evening.

Mr Murugajahal is all praise for Mary whom he fondly addresses as ‘kagak’ or elder sister in Malay. “She is such a kind soul!” he said.



Mdm Mary Chau and Mr Murugajahal.

CARING ASSISTANCE FROM NEIGHBOURS

NEW

The CAN programme encourages volunteers to look out for their frail and vulnerable neighbours especially those who live alone or whose families are unable to provide them with the quality of care that they need.



AGEING IN COMMUNITY - REFERRALS

REFERRING CLIENTS TO APPROPRIATE SERVICES...

Referrals to care services have continued to increase in 2013. Last year, AIC facilitated more than 26,800 referrals to services in the health and social care sectors.

Home care, day care services and SPICE, in particular saw a marked increase. This can be attributed to the roll out of new services to enable Singaporeans to receive care at home.

• NURSING HOME

3,290
3,068 (YR2012)

• DEMENTIA DAY CARE

1,350
1,158 (YR2012)

• SPICE

258
121 (YR2012)

• DAY CARE

1,459
757 (YR2012)

• DAY REHABILITATION

8,160
6,576 (YR2012)

• SENIOR HOME CARE

3,757

• HOME CARE

Consists of home medical, nursing and therapy. Home nursing received the most referrals.

8,556
5,861 (YR2012)



MORE INITIATIVES...

These services have resulted in positive care outcomes for patients and clients.



REDUCED HOSPITAL READMISSION RATE - AGED CARE TRANSITION (ACTION)

▶ 32,134 patients benefitted since it started in 2008.



Hospital readmission rate for Action-clients was 6.1% (as at September 2013), **DOWN FROM 10%** in July 2010.



ENHANCED RE-INTEGRATION TO COMMUNITY - TRANSITIONAL CONVALESCENT FACILITIES

▶ 76% of patients discharged back home.



▶ 64% of patients achieved significant improvement for their Activities of Daily Living (ADL) after the programme.



IMPROVING ACTIVITIES OF DAILY LIVING - ENHANCED ELDERCARE PROGRAMME (EEP)

▶ 86% of EEP clients had no deterioration in Modified Barthel Index scores at three months of enrolment.



FACILITATING CONVERSATIONS ON CARE NEEDS - ADVANCE CARE PLANNING (ACP)

▶ ACP Service is available in all restructured hospitals and several community hospitals, nursing homes and community services with more than 1,000 trained facilitators.



SUPPORTING CAREGIVERS - RESPITE CARE OPTION

SUSTAINING HELP AND HOPE

Dementia is a condition that affects the brain, reducing the person's ability to think, reason, remember, problem-solve and make judgement. For caregivers, taking care of someone with dementia can be especially trying, and at times, overwhelming.

Mr Richard Ashworth started caring for his foster father who was diagnosed with dementia three years ago. Caring for him took up all of his time and energy, and he had to give up his hobbies and volunteer work which he so loved.

"That was my frustration. A lot of things which I enjoyed doing, I could not do," said the 59-year-old retiree.

Richard's neighbour introduced him to the Alzheimer's Disease Association (ADA) which runs the Person-Centred Home-Based Intervention Programme. It was launched in January 2013 to help caregivers like him care for their loved ones with dementia.

Under this programme, care professionals pay four visits over three to six months. In between the visits, they would make regular phone calls to keep in touch with the caregivers. The support helps caregivers overcome their problems by offering advice and linking them to agencies which can offer practical help like day care service for his father so that Richard can have some time for himself.

When the ADA team visited Richard at his home for their first meeting, he shared his frustrations. Recalling that meeting, Richard said, "It was like wow... there's somebody there to help you – it was such a huge sense of relief!"

For caregivers like Richard, the programme has renewed his drive to continue caring for his father.



Richard, his father and domestic helper.



MORE SUPPORT FOR MENTAL HEALTH CLIENTS IN THE COMMUNITY

NEW



ELDER SITTER PROGRAMME

Engages seniors with early dementia at their homes to take part in meaningful activities, coaches their caregivers on how to better engage their loved ones and provides temporary respite for caregivers.



INTEGRATED COMMUNITY MENTAL HEALTH NETWORK

Collaborating with partners from the social and healthcare sector to create integrated care services to better support clients in the community.



SEVEN CREST (Community Resource, Engagement and Support Team) reach out to **OVER 9,000 RESIDENTS**, increasing public awareness on mental health, providing basic emotional support and linkage to mental health services.



THREE COMIT (Community Intervention Team) provide counselling, psycho-social therapy and caregiver support to **OVER 450 CLIENTS**.



TWO ASCAT (Assessment and Shared Care Team) provide assessment and treatment by a multi-disciplinary, physician-led team, benefitting **OVER 1,000 CLIENTS**.



Richard and his father.

PERSON-CENTRED HOME-BASED INTERVENTION PROGRAMME

NEW

Programme partner ADA, is a home-based behaviour management and support service for caregivers who require support in caring for their loved ones with dementia.



SUPPORTING CAREGIVERS - RESPITE CARE OPTION

HELPING CAREGIVERS 'RECHARGE'

Caring for a family member who is infirmed.

Sometime last year, Mr Yong Tuck Ming, 49, a semi-retired landscape consultant and his wife, found themselves having to care for his 64-year-old brother, Mr Yong Tuck Sang who was diagnosed with tuberculosis, macular degeneration and mild dementia.

All these occurred quite suddenly and took the family off-guard when Tuck Ming made his elder brother, who lives with him and his family, visit a doctor because he was losing weight drastically.

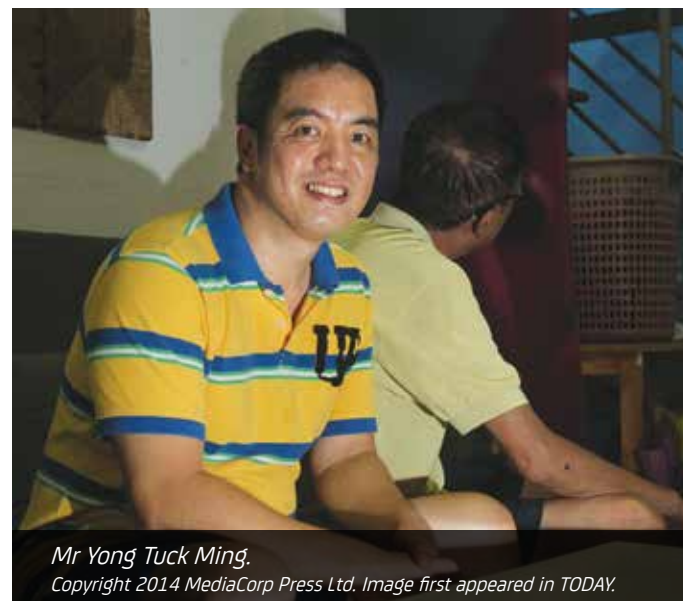
After two hospitalisations totalling three months, the elder Tuck Sang returned home disoriented. With his dementia and severe loss of vision, Tuck Sang could not care for himself. So the responsibility of caring for him fell on Tuck Ming and his wife.

Lacking experience and having a church camp to attend in Penang for two weeks, Tuck Ming looked around for someone or a place that could take his elder brother in while they were away. He discovered that a two-week stay at a private nursing home would be costly.

Then, he found out from a medical social worker about Nursing Home Respite Care (NHRC).

His elder brother qualified for the programme after undergoing means-testing for ILTC subsidies.

Tuck Ming said that if they had to skip the camp, it would have caused "negative emotions". As it turned out, he and his wife had their "break" and they came home feeling better. "We came home recharged and could think straight again!" said Tuck Ming.



Mr Yong Tuck Ming.
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98% OF THE CAREGIVERS

felt that NHRC helped to alleviate their stress and motivated them to continue caring for their loved ones at home.



MORE SUPPORT FOR CAREGIVERS...

ABOUT 6,600 caregivers applied for **CAREGIVERS TRAINING GRANT (CTG)** to attend caregiving related courses.



CTG provides caregivers, including foreign domestic workers, with subsidies to attend training to build up their capabilities in meeting the physical, social and emotional needs of their care recipients.

MORE THAN 6,000 BENEFITTED from **FOREIGN DOMESTIC WORKER (FDW) GRANT** in 2013.



FDW Grant offsets part of the cost of hiring a foreign domestic worker to look after loved ones with at least moderate disabilities with a \$120 grant.

NURSING HOME RESPITE CARE

A two-year pilot programme launched in May 2013 to provide temporary relief for caregivers from the stress of caring for their loved ones.

17 nursing homes are on this programme and senior clients can stay from seven to 30 days depending on their needs. To qualify, patients need to undergo the Ministry of Health's household means-testing for ILTC subsidies. And depending on their eligibility and subsidy level, they pay between \$25 and \$160 a day.



SUPPORTING CAREGIVERS - INFORMATION SUPPORT

ALL THE INFORMATION THAT YOU CARE TO KNOW

Many of us already care for our aged parents or grandparents or older spouse. Often, we wonder if what we do is the right thing for them.

Senior catering sales manager, Ms Christine Chew, 44, and her elder sister provide care for their parents. Her father who was diagnosed with colon cancer in 2007, which is now in remission, has diabetes, heart disease, sleep apnoea as well as kidney and eye problems.

“My father needs to take more than 10 different types of medication every day. Between my sister and me, we have to see to it that he takes all of them in the right dosage and at the right time. Sometimes, we find ourselves at a loss, not knowing what to do,” said Christine.

Thankfully for people like Christine, they can turn to the Singapore Silver Pages (SSP) for the information they need to care for their elderly loved ones.

Christine added, “Previously, I had to look all over

on the internet for information. SSP has information on common chronic illnesses, eldercare products and services, various health and social care service providers and caregiving-related resources. What’s more, it’s a local website so the resources recommended can be found locally.”



Ms Christine Chew and her parents.

Attracted over **60,000 VISITORS** since its enhancement in July 2013.



BETTER INFORMATION ACCESS IN THE COMMUNITY...



46 ELDERCARE INFO CORNERS ISLANDWIDE, covering restructured hospitals and community clubs. These stands **DISPLAY CAREGIVING PUBLICATIONS AND BROCHURES ON ELDERCARE SERVICES** for the public.



UPDATED CAREGIVING GUIDES which provide tips on caregiving, information on caregiver support services and schemes available.



15,000 READERS RECEIVE NEXTSTEP, a quarterly community newsletter with information on care options, caregiving tips and product guides.



OVER 4,600 FACEBOOK USERS JOINED CARERS SGI! More news, silver deals and contest for the online community of caregivers to share information, resources and experiences.



MOBILE ELDERCARE LOCATOR (MEL) APP now includes social care service providers **ENABLING USERS TO SEARCH AND LOCATE SERVICES** near where they are.



OVER 19,000 VISITORS VISITED AICARE HUB, located at City Square Mall. Over 3,200 caregivers and care recipients obtained relevant information, were referred to, and applied for eldercare and disability schemes and services provided by AIC and our partners.



The Community Engagement Team partnered MP advisors and grassroots volunteers to **PROMOTE PROGRAMMES AND RESOURCES** via various outreach activities in 54 constituencies. More to follow in 2014.

SINGAPORE SILVER PAGES

ENHANCED

The enhanced Singapore Silver Pages (SSP), www.silverpages.sg, was launched in July 2013 as a one-stop resource on eldercare and caregiving. It now provides greater depth of information and covers a broader range of healthcare, social care and caregiving topics.

It also includes information on mental well-being, exercise, healthy recipes and financial planning. A new feature (Readspeaker-enabled) allows caregivers and seniors with poorer eyesight to listen to the content.

COMING **TOGETHER...** we

GROW STRONGER



The demand for care services and higher care standards will increase. AIC works with our Community Care partners to constantly review care processes, improve care standards and boost capabilities. The Community Care sector is not just growing in numbers but gaining strength to provide better care, higher productivity and quality services to clients and attracting individuals who seek a meaningful career to help our seniors live well.





PEOPLE EXCELLENCE - MANPOWER RECRUITMENT

BRINGING YOU REWARDING CAREERS

Being a part of Community Care is more than just a job. It is a calling that enables you to make a profound difference in the lives of others.

With more aged care facilities and services developing in Singapore, Community Care is a ‘sunrise’ sector which needs more passionate people. Between now and 2020, the sector needs to attract 11,000 more workers.

To reach out to potential job seekers, the ILTCareers (www.ILTCareers.sg) portal was launched in October 2013. Over 50 ILTC employers have partnered ILTCareers to offer dynamic ILTC jobs.

Ms Peggy Ong, Director, Human Resource, NTUC Eldercare said, “The demand for manpower in Community Care is growing. ILTCareers is a convenient platform to reach out to potential candidates. Besides recruitment, it shares real-life stories and experiences which can help jobseekers gain a better sense of what the professions offer.”

ILTCareers targets fresh graduates, mid-career switchers, retirees and back-to-work parents. The online recruitment service is offered free-of-charge to registered institutions and job seekers.



ILTCareers portal (www.ILTCareers.sg).

ILTCAREERS

It is Singapore’s first dedicated portal on ILTC careers. An initiative by AIC and ILTC Manpower Council, the portal helps to raise awareness of the diverse and fulfilling jobs available in the Community Care sector and to attract more people to join.



PEOPLE EXCELLENCE - UPGRADING AND TRAINING

MEETING ASPIRATIONS

Since receiving her Diploma in Nursing in 2007, Ms Precilla Lai, a senior staff nurse with Home Nursing Foundation, has made steady progress acquiring an Advanced Diploma in Nursing in 2010 and then a Bachelor of Science in Nursing in 2011.

Ms Lai is thankful for the many scholarships and study grants available to those in the ILTC sector to improve and upgrade their skills. It is through the Social and Health Manpower Development Programme award (SHMDP-ILTC) administered by AIC that she is now able to pursue her Master of Nursing at Yong Loo Lin School of Medicine, National University of Singapore.

After she completes her Master programme in 2015, Ms Lai will qualify as an Advanced Practice Nurse (APN). Said Ms Lai, “My appending role will enable me to detect changes in my patients’ conditions, order appropriate diagnostic tests and possibly in the future, prescribe medications. I hope this will help me become the bridge between the Nurse and other healthcare professionals, making healthcare services and social welfare more accessible to the neediest in the community.”

She added, “I have a soft spot for the elderly especially those in the lower income groups with medical conditions. It’s gratifying when they smile and thank you for what you’ve done to help them live well despite their conditions.”

Since 2002, about \$12 million has been invested in the SHMDP-ILTC programme with more than 500 award recipients benefitting through local or overseas training.

\$5.6 MILLION FUND was set aside for manpower capability and upgrading in 2013 to groom ILTC professionals and leaders.

ILTC MANPOWER DEVELOPMENT AWARDS

65 ILTC professionals were presented the SHMDP-ILTC and the ILTC-Upgrading Programme or ILTC-UP awards on 22 October 2013. Two other awards, Temasek Cares-Study Award (TC-SA) and Mid-Term Scholarship for Medical Social Work (MTS MSW) award were also presented at the ceremony for the first time.



PEOPLE EXCELLENCE - UPGRADING & TRAINING

BETTER TO SEE YOU WITH

Having good vision is important even in old age. Being able to see properly has far-reaching impact on the quality of life for seniors.



Ms Soon Kuan Bee (right) demonstrating how to better apply eye drops.
Source: Lianhe Zaobao © Singapore Press Holdings Limited. Reproduced with permission.



With this in mind, AIC teamed up with the Singapore National Eye Centre (SNEC) to improve eye care for the elderly residents in nursing homes. Organised by AIC Learning Institute (AIC-LI), SNEC conducted two Ophthalmic Skills Training workshops for nurses and nursing aides from the nursing homes to equip them with the knowledge and skills to care for elderly under their charge.

Topics taught included eye care, eye vision testing and how to spot the early symptoms of common age-related eye diseases such as dry eyes, cataract, glaucoma and diabetic retinopathy which are the main causes of visual impairment among the elderly. If treated early, they can improve the independence of the elderly and help prevent falls.

Ms Soon Kuan Bee, a registered nurse at Lee Ah Mooi Old Age Home and a participant from the first run of the training said, “The knowledge and skills gained from the Ophthalmic Training Workshop have increased my understanding of eye care for elderly patients. This has proven to be very useful in my work. I am now better skilled and more confident in detecting the symptoms for eye conditions among the elderly, and also know the steps to take to help them recover well.”

This initiative can benefit some 9,600 nursing

home residents in more than 60 nursing homes in Singapore.

AIC LEARNING INSTITUTE

AIC-LI was established in 2010 to facilitate capability building by organizing and conducting skills training for ILTC staff aligned to emerging and enhanced standards of care. AIC-LI also actively promotes courses to interest ILTC institutions, aggregates the demand and facilitates their participation.



MORE...



EXTENDED ITS TRAINING PROGRAMMES to social care providers.



Facilitated training programmes based on **“ENHANCED NURSING HOME STANDARDS”** and offered a suite of training programmes for Nursing Home care professionals.

MORE THAN 6,000 training places were provided for ILTC professionals last year.



ORGANISATION EXCELLENCE - QUALITY IMPROVEMENT

SOLUTIONS THAT MAKE A DIFFERENCE

Physiotherapist Charity Chu makes sure that every patient gets quality time and the best treatment every time.

In 2009, for every 10 patients scheduled for therapy sessions at St Andrew's Community Hospital (SACH), only five or six would turn up. Then there were times when the therapists found themselves overbooked with patients, which resulted in less time with patients when all decided to show up. The turning point came when Charity could only devote 10 minutes to a patient instead of the one-and-a-half hour rehabilitation session as scheduled. And before Charity could make up for it in the next session, the patient passed on.

Determined to address this, Charity and her team implemented a Case Management System to check on patients if they missed two or more consecutive sessions, and to find out why. They also met up with caregivers of patients, briefed them on the rehabilitation process and got their support to ensure that their family members or loved ones attended the therapy sessions.

Since implementing the system, attendance rate at the Centre has improved by 20% to reach 80%. The Centre also began customising care including a pilot programme to group patients with mild to moderate dementia according to their individual therapy needs.

Ms Chu pointed out that, "Boosting productivity is not solely about achieving yardsticks like attendance rates. It ultimately boils down to providing the best care for our patients and seeing their physical abilities improve."

Another SACH's quality improvement project which successfully reduced patient's length of stay to 33 days, down from 42 to 50 days, won them the Bronze award in the ILTC Quality Festival Poster competition 2013.

ILTC QUALITY FESTIVAL

In its third year, the Festival themed "Quality: Our Way of Life" encouraged the sector to incorporate continuous quality improvement as part of their regular work. It also fosters a stronger culture of quality improvement among ILTC staff and provides a platform for sharing of ideas on quality improvement and patient safety in Community Care.



KEY HIGHLIGHTS



For the first time, social care providers attended the event. **OVER 300 PARTICIPANTS** from 50 organisations exchanged ideas on quality improvements.



55 ABSTRACTS ON QUALITY IMPROVEMENT PROJECTS from **22 ORGANISATIONS** submitted for Poster Competition 2013.



*Ms Charity Chu and her patient.
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ORGANISATION EXCELLENCE - QUALITY IMPROVEMENT

SO SHIOK!

Young or old, eating is one of life's greatest pleasures. And for food to be more appetising, there must be variety, they must taste good and also look appealing.

AIC partnered the Singapore Chefs Association (SCA) on ILTC Nutrition Movement 2013 to raise the quality of nutrition and food services for residents in nursing homes.

The cooks from 12 nursing homes attended the three half-day culinary 'Boot Camp' training sessions conducted by celebrity Chef Eric Teo and his associates.

56-year-old Ms Janet Chia from Sathya Sai Social Service who attended the boot camp training said, "As a cook, I constantly think about cooking dishes which are nutritious and delicious. However, I do face constraints in preparing the meals because of certain dietary restrictions of my nursing home residents.

ILTC NUTRITION MOVEMENT

An annual campaign that reinforces the importance of good nutrition and food service in the ILTC sector.

Now that we are able to learn from these professional chefs, I am more inspired and thankful for their guidance in producing different and creative dishes."

Another part of the programme called 'Partner a Nursing Home' involved SCA's volunteer chefs working with nursing homes to assess their needs and provide professional advice on improving the variety of meals served at the homes. The chefs also advise nursing homes on how to better organise their kitchen work process and improve food preparation.

The one-year programme which was launched in September 2013 involves seven nursing homes for a start.



OTHER PARTS OF THE PROGRAMME INCLUDE...



15 NEW RECIPES for nursing homes.

- ▶ These are included in AIC's 'Cooking for Health' cook book.



FRIENDLY COMPETITION among teams

- ▶ of nursing home cooks in The 'S.H.I.O.K Chefs' Challenge: The Secret Ingredient'.



- ▶ **E-LEARNING MODULES** to benefit more providers in the ILTC sector.



Nursing home cooks during the 'S.H.I.O.K Chefs' Challenge.

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





ORGANISATION EXCELLENCE - PRODUCTIVITY

INNOVATE FOR BETTER CARE

More ILTC organisations are tapping on the Healthcare Productivity Fund-Intermediate and Long-Term Care (HPF-ILTC) to improve business processes and operations, and reap productivity gains. Ren Ci Hospital is one of them.

It now uses a Vendor Managed Inventory (VMI) system to automate the supply and storage of its medical consumables. The hospital also engaged ST Logistics for its inventory and linen management (procurement, storage and replenishment), with the use of Radio Frequency Identification (RFID) technology. With this innovation, the hospital's care staff drops the RFID disc of the item that is running low into the RFID Replenishment bin to activate an auto top-up. An alert will be sent to ST Logistics to arrange delivery of the required items to the Hospital's wards directly. This has resulted in accurate and optimal

stock consumption, and better space utilisation at institution and ward-level.

Ms Loh Shu Ching, Chief Executive Officer of Ren Ci Hospital said, "The HPF-ILTC gave us added support in our productivity drive. Through VMI, we have not only saved costs but time as well. Much of the time spent previously by our staff to manually keep track of stock levels can now be devoted to attending to the care needs of our patients."

19 projects benefitting 33 ILTC service providers have been approved under the HPF-ILTC.

\$110 MILLION HPF-ILTC FUND, supported by the National Productivity and Continuing Education Council and the MOH, introduced to assist ILTC organisations in productivity initiatives over five years from 2012 to 2016.

HEALTHCARE PRODUCTIVITY FUND-INTERMEDIATE AND LONG-TERM CARE

The HPF-ILTC is an initiative under the Healthcare Productivity Roadmap, endorsed by the National Productivity and Continuing Education Council (NPCEC). ILTC service providers can apply for the HPF-ILTC funding to embark on projects and training to raise productivity.



ORGANISATION EXCELLENCE - PRODUCTIVITY

IT CAN BE FUN FOR THE ELDERLY

Exercising for the elderly at the Day Rehabilitation Centres (DRCs) will soon be more interactive and fun as more technology-assisted equipment are rolled out.

The Singapore Polytechnic (SP) and AIC have developed a range of equipment to improve rehabilitation for the elderly and the disabled under a programme funded by Temasek Cares called "Technology-assisted Rehabilitation in the Community – Temasek Cares – TriC".

The four prototypes are the Bilateral Limb Manipulator, Floor Projection System, Augmented Reality Games for Therapy, and Computer-based Cognitive Training software.

"With the fun elements in these innovations, they will entice and further motivate our clients to engage in rehabilitation activities and improve their agility and functional recovery. For instance, the Computer-based Cognitive Training programme allows therapists to conduct structured and interactive cognitive therapy involving puzzles and memory card games through the use of a computer system. This greatly boosts productivity as the therapists are able to attend to more than one client at a given time," said Mr Sairam Azad, Assistant Director, AWWA Elderly Services.

The equipment are currently used on trial at AWWA READYCARE Centre and St Andrew's Community Hospital's Day Rehabilitation Centre.



An elderly experiencing the Computer-based Cognitive Training Programme.

TEMASEK CARES – TECHNOLOGY-ASSISTED REHABILITATION IN THE COMMUNITY (TRiC)

Recognising the potential of technology in modernising rehabilitation services in community-based facilities such as DRCs, Temasek Cares invited AIC in 2012 to partner SP to develop a suite of novel technology-assisted equipment for rehabilitation under Temasek Cares – TriC.



ORGANISATION EXCELLENCE - STRATEGIC COLLABORATIONS

NEVER TOO OLD

Everyone – young and even old – should do their part to stay healthy by engaging in community activities.

Some 2,500 residents from different walks of life took part in the first large-scale Nee Soon GRC Active Ageing Carnival on a Sunday morning, on 27 October 2013. Residents learnt about the health and social care services and schemes available for ageing-in-place through a series of activities and exhibits by AIC, Alexandra Health System/ Khoo Teck Puat Hospital, Health Promotion Board, Thye Hua Kwan Moral Charities, Clarity Singapore and Aaxonn.

The residents also joined in a mass workout, and brisk walking. Many enjoyed watching the dance performances, learnt health and fitness tips from various health and social care partners. A family breakfast-making competition was also held to promote inter-generational bonding and communication.



Nee Soon GRC Active Ageing Carnival.

Mr Norman Aw Kai Aik, BBM, Canberra Citizens' Consultative Committee Chairman highlighted, "Seniors can be fun-loving and highly energetic going by their keen participation in the community activities we jointly organise with our stakeholders. Their sense of independence and positive attitude towards life should be encouraged. We hope that more and more of our elderly will stay healthy and even volunteer their time to help others to stay healthy through our Active Ageing programmes."

AIC's REIT-North and Community Engagement teams were at the carnival to engage Singaporeans in the community on active ageing.

REGIONAL ENGAGEMENT AND INTEGRATION TEAMS (REITs)

REITs (REIT- North, REIT-West, REIT-East, REIT-Central) connect various care services within the different regions of Singapore, to work together and integrate their care schemes for clients.



ORGANISATION EXCELLENCE - KNOWLEDGE SHARING

ACT, COLLABORATE, AND TRANSLATE (ACT!)

The needs and expectations for care are evolving rapidly. It is therefore essential to learn and share experiences from and with the world.

The World Congress on Integrated Care (WCIC) 2013 was the first world conference on care integration organised by the AIC in collaboration with the International Foundation for Integrated Care and McKinsey & Company.

Held in November 2013, the conference, themed ACT! –The Global Response to Care Integration highlighted the importance and urgency of care integration as a means to transform healthcare systems to better deliver cost-effective health and social care.

Keynote speaker, Professor Chris Ham, Chief Executive of the King's Fund, UK, shared on the common ingredients needed for different care models and how to successfully adapt and shape them into applications in different contexts in his talk entitled, "Around the World in 40 minutes".

The latest trends in supporting our caregivers and ways to develop a dementia-friendly community were among the many interesting sessions at WCIC. In addition, participants were engaged in masterclasses to delve on topics ranging from leadership to technology transformations in integrated care.

Dr David Perkins, Professor, Centre for Rural and Remote Mental Health, University of Newcastle, Australia said, "The Congress allowed me to meet and talk with leaders of the most advanced and well organised health systems in the world. Many of the presentations were inspirational."

MORE THAN 1,000 social care and healthcare practitioners from 30 countries attended the international conference.

WORLD CONGRESS ON INTEGRATED CARE

WCIC (www.integratedcareconference.sg) is one of a series of key conferences on care integration organised by AIC. It builds on the success of the Inaugural Asian Conference on Integrated Care in 2011.



COMING TOGETHER... we

WORK SMARTER

With the integration of health and social care functions, AIC now delivers a wider range of services for our clients. The AIC team is continually looking at new and better ways to help the elderly live well and age gracefully. We work hard, combining “heads and hearts” in our tasks. And we play hard. The passion in what we do lies in the belief that our work benefits our clients, allowing them to age-in-place in the community. We PRIZE ourselves as ONE.





STRONGER AIC - PRIZE

At the heart of AIC lies our five core values, which we call **“PRIZE”**. These values shape the culture and define the character of our organisation. They guide how we behave and make decisions.



PROFESSIONALISM

“I constantly strive for the best outcome in what I do, with integrity and purpose.”

– Yan Yan



RESPECT

“I value the ideas and views of my clients, partners and colleagues, which contribute to better integration of community-based care.”

– Vivian Goh



INNOVATION

“I believe in the power of effective and creative solutions to make AIC a better place to work in and our care services more accessible to clients.”

– Corine Kung



ZEST

“Zest embodies fun, passion, joy and motivation for ourselves and clients.”

– Dr Wong Loong Mun



EMPATHY

“Showing care and concern for those around me is my way of making AIC a caring and supportive organisation.”

– Marilyn Fernando





STRONGER AIC - TALENT DEVELOPMENT

CAREER DEVELOPMENT

AIC emphasises talent development and capability building. We actively map out our employees' career progression with them to ensure that they achieve their aspirations and enjoy a rewarding career in AIC.

"My passion for the eldercare sector grew stronger when I worked in AIC. I find my work very meaningful as it helps to improve others' lives. This motivates me to learn and build on my skills in order to contribute in bigger ways. I am grateful for the opportunity to further my education at one of the top schools of public health."

Dr Dennis Chia Bingzhu, recipient of AIC scholarship incorporating Health Manpower Development Programme, who is currently pursuing a Master of Public Health in Johns Hopkins Bloomberg School of Public Health



Dr Dennis Chia (middle) with his classmates.

"I was with the Community Care Development Division previously for four years. When I expressed my interest to rotate to other divisions within AIC, it was supported. The transfer to Community Mental Health Division has enabled me to better understand the different parts of the sector through working with various ILTC organisations – both health and social care. It not only develops me professionally but also promotes my career development within AIC."

Ms Young Ming Ee, Assistant Manager, Community Mental Health Division



Ms Young (first row, third left) and her division's colleagues.



ZEST FIESTA

AIC's Induction Programme helps newcomers to adapt faster to the corporate environment. They attend a one day team bonding session, which broadens their understanding of AIC in fun-filled ways.

"I joined AIC following CEL's aged care function integration with AIC's. It has really been an interesting journey. I learnt about AIC's work, culture and people through the games, interactions and presentations during my induction. I also got to know many others who are new to the family like me. I must say that we are really all Zest-ed up now!"

Ms Pai Su Qin, Executive, Corporate Services & Strategy Division



Newcomers engaging in a game.

JOURNEY OF CHANGE

The Community Care sector is evolving due to the changing needs of our clients. As AIC continues to launch new initiatives, we need to equip our team with the right skill sets to manage the journey as they enrich our clients' lives. This was done through a series of change management workshops.

"The workshop enabled our fellow colleagues to better appreciate the need for change, and understand the emotions and reactions that go with it. It also equipped all of us with change-ready techniques, and re-connected us to the purpose of our work. At the same time it fostered a greater bonding among us."

Ms Cindy Tan, Director, People Excellence



AIC colleagues at a change management workshop.



ENGAGED WORKFORCE - ENVISIONING



Team AIC at its "Visioning" exercise 2013.



AIC kick-started its "Visioning" exercise in June 2013 by interviewing AIC Board members and conducting focus groups with more than 60 employees from all levels.

Words and phrases which resonated including "inter-connected", "together", "integrate", "live well", "being happy" and "ageing in place" kept coming up repeatedly, reflecting a common desire for AIC to help its clients care for themselves and live well.

After a six-month exercise, the AIC Board endorsed the new Vision statement "A vibrant care community enabling people to live well and age gracefully". The new vision reflects AIC's key role to co-create, with the client and his family, the community of care around the client. It also resonates with our mission, which is about helping people to live as well as they can, and to age well near their loved ones.

AIC also refreshed its Mission statement to reflect its expanded mandate to include social care referral and services development. The new statement reinforces AIC's mission to integrate care around its clients and this can only succeed if AIC works simultaneously at the client, care sector and care system levels.





ENGAGED WORKFORCE - NO STRANGERS IN AIC

To create an environment of “No Strangers in AIC”, activities are organised regularly to bring our employees together through Club Z.

One of the key highlights is the formation of interest groups. These interest groups are set up by staff and enables those with common interests to come together.



AIC employees engaged in the various activities organised by Club Z.



450 happy employees came together as one big corporate family at our first Dinner and Dance.

It was a fun-filled night of vibrant colours, fun games, delicious food, lively entertainment and good cheer. The event also saw many colleagues displaying their

hidden talents and others taking their fashion styles to new heights with daring colour combinations.



Highlights of AIC's dinner and dance.





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Dr NG LI LING

Senior Consultant
Department of Psychological Medicine
Changi General Hospital

Ms SUSAN NIAM

Director
Operations (Allied Health Services)
Tan Tock Seng Hospital

Ms PHUA PUAY LI

Director, Manpower Planning &
Strategy
Ministry of Health

Ms ALISON SIM

Director of Nursing
St Andrew's Community Hospital

Dr WONG KIRK CHUAN

Chief Operating Officer
Agency for Integrated Care

STRATEGIC ADVISORY COMMITTEE FOR QUALITY IMPROVEMENT FOR THE ILTC SECTOR (SAC-QI)

CHAIRPERSON CHUA SONG KHIM

Group Chief Executive Officer,
NTUC Unity Healthcare
Executive Director, NTUC Eldercare

CO-CHAIRPERSON Associate Professor TAN BOON YEOW

Medical Director
St Luke's Hospital

MEMBER SAIRAM AZAD

Centre Manager
Asian Women's Welfare Association
(AWWA) Readycare Centre

Ms CHEONG CHOY FONG

Director, Quality Management Office
Khoo Teck Puat Hospital

Ms SUSAN GUI

Director of Nursing
Villa Francis Home for the Aged

Associate Professor ONG BIAUW CHI

Director, Clinical Governance
Director, Patient Safety
Head, Department of Anaesthesiology
Singapore General Hospital

Ms LYNDIA SOONG

Chief, Community Care
Development Division
Agency for Integrated Care

Dr VOO YAU ONN

Director, Standards and
Quality Improvement Division
Ministry of Health

Adjunct Associate PROFESSOR NELLIE YEO

Executive Director &
Group Chief Quality Officer
National Healthcare Group

TEMASEK CARES STUDY AWARD SELECTION COMMITTEE

CHAIRPERSON CHERN SIANG JYE

Chief Corporate Officer
Agency for Integrated Care

REPRESENTATIVE Ms WOON SAET NYOON

General Manager
Temasek Cares CLG Limited

MEMBER Ms AW THONG LIN

Lecturer, School of Health Sciences
Ngee Ann Polytechnic
(up to 30 June 2013)

Ms DORIS CHAN

Manager (Clinical)
Nanyang Polytechnic

Ms FLORENCE CHEONG

President
Singapore Association of
Occupational Therapists

Ms PHILOMENA LIEW MENG MOI

Assistant Director of Nursing
Changi General Hospital

Ms VIVIAN LIM

Vice-President
Singapore Physiotherapy Association

Ms MAE TANG SHEUE YIN

Course Manager/Section Head,
Nursing Department, School of
Applied and Health Sciences
ITE College East

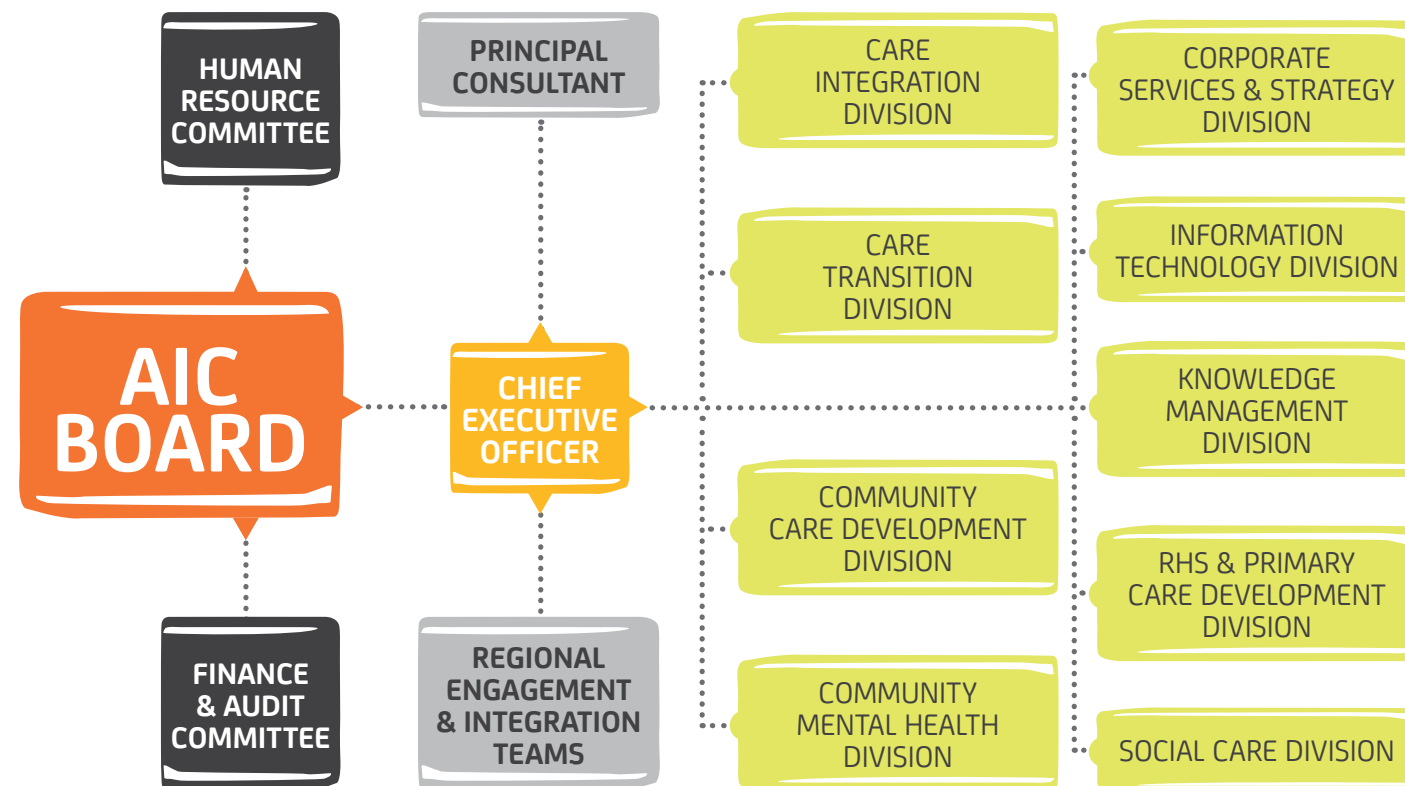
TAY WEI SERN

Deputy Director, Health Sciences
Course Manager, Allied Health
ITE College East





OUR ORGANISATION



★ CARE INTEGRATION DIVISION

The Care Integration Division develops new models of care, services and programmes in the sector. The division also oversees development of care services and programmes.

★ CARE TRANSITION DIVISION

The Care Transition Division manages all client referrals to the appropriate eldercare services and works with partners to ensure a smooth and seamless transition of care for clients. The division also administers funding schemes supporting care transitions.

★ 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.

★ 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.

★ CORPORATE SERVICES AND STRATEGY DIVISION

The Corporate Services and Strategy Division supports AIC and divisions to achieve their desired outcomes, objectives and goals. The division comprises Corporate and Marketing Communications, Corporate Development, Finance and Office Administration, and People Excellence Department.

★ 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 works with industry partners to embrace innovation and productivity and drive growth in the ILTC sector.

★ REGIONAL ENGAGEMENT AND INTEGRATION TEAMS

The Regional Engagement and Integration Teams connect various care services within the different regions of Singapore, to work together and integrate their care schemes for clients.

★ 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 care and home care sectors.

★ SOCIAL CARE DIVISION

The Social Care Division oversees the planning and development of services to better support the elderly and caregivers. The division administers assistance schemes to help caregivers.





BOARD OF DIRECTORS



Dr JENNIFER LEE

Senior Consultant,
Ministry of Health



Dr ANG PENG CHYE

Psychiatrist,
Psychiatry, Psychotherapy
& Wellness Holdings Pte Ltd

Managing Partner,
Centre for Effective Living
Pte Ltd

Up to 31 Mar 13



BENEDICT CHEONG

Chief Executive Officer,
Temasek Foundation

Up to 31 Mar 13



**Professor
CHONG TOW CHONG**

Provost, Singapore
University of Technology
and Design

From 1 Apr 13



LEE SEOW HIANG

Chief Executive Officer,
Changi Airport Group
(Singapore) Pte Ltd



Ms MAZNAH MASOP

Chief Executive Officer,
Persatuan Pemuda Islam
Singapura (PPIS)



**Associate Professor
PANG WENG SUN**

Chairman, Medical Board,
Yishun Community Hospital

Senior Consultant Geriatrician,
Khoo Teck Puat Hospital



Dr GLENN STEELE

President and
Chief Executive Officer,
Geisinger Health System
United States



CHUA CHIN KIAT

Board Member



Mdm CHUA FOO YONG

Board Member

From 1 Apr 13



GOH CHYE BOON

Executive Vice President,
Resort Operations
Resort World Sentosa Pte Ltd

From 1 Apr 13



KWOK WUI SAN

Partner,
PricewaterhouseCoopers
Singapore

From 1 Apr 13



Ms TAN HWEE BIN

Executive Director,
Wing Tai Holdings Limited



Ms TEOH ZSIN WOON

Deputy Secretary
(Development),
Ministry of Health



Ms THERESA GOH

Managing Partner,
ThreeSixty Partnership



GREGORY VIJAYENDRAN

Partner,
Rajah & Tann LLP

From 1 Apr 13

HUMAN RESOURCE COMMITTEE

Dr Jennifer Lee | Chua Chin Kiat |
Associate Professor Pang Weng Sun | Ms Theresa Goh

FINANCE AND AUDIT COMMITTEE

Ms Tan Hwee Bin | Lee Seow Hiang | Kwok Wui San





SENIOR MANAGEMENT

01.
Ms LYNDA SOONG
Chief, Community Care Development Division

02.
Dr JASON YAP
Chief Knowledge Officer
Chief, Regional Engagement and Integration Team, (REIT)-Central

03.
Dr JASON CHEAH
Chief Executive Officer

04.
Dr IRWIN CHUNG
Director, Care Integration Division

05.
Ms REBECCA CHONG
Deputy Director, Community Mental Health Division

06.
Ms SEE YEN THENG
Deputy Director, Community Mental Health Division

07.
Dr WONG LOONG MUN
Principal Consultant
Chief Care Transition Officer

08.
Dr WONG KIRK CHUAN
Chief Operating Officer
Chief, Regional Health Systems and Primary Care Development Division
Chief, REIT-East

09.
Dr TAN WENG MOOI
Chief, Community Mental Health Division

10.
Ms POLLY CHEUNG
Chief, Care Integration Division
Chief, REIT-North

11.
DARREN YEONG
Deputy Director, Regional Health Systems and Primary Care Development Division

12.
Ms LOK YOKE HAR
Deputy Director, Community Mental Health Division

13.
CHERN SIANG JYE
Chief Corporate Officer
Chief, REIT-West and REITs-Coordinating Unit

14.
Dr SEOW YONG TONG
Director, Community Care Development Division
Director, REIT-North

15.
PAUL NG
Head, REIT-West and REITs-Coordinating Unit

16.
Ms CAROL CHOI
Director, Finance and Office Administration

17.
Ms CINDY TAN
Director, People Excellence

18.
Ms CHUA MUI LEE
Deputy Director, People Excellence

19.
Dr LYDIA SEONG
Deputy Director, Knowledge Management Division

20.
Ms ALICE CHIN
Head, Social Care Division

21.
EDWIN CHEW
Chief Information Officer

22.
ANDY SEET
Director, Corporate and Marketing Communications

23.
Ms CAMELIA POH
Head, Corporate Development

24.
Ms IVY LOK
Deputy Director, Care Transition Division

25.
Ms WINIFRED LAU
Director, Regional Health Systems and Primary Care Development Division

26.
KELVIN LIM
Chief, Social Care Division

27.
Ms YAN YAN
Deputy Director, Regional Health Systems and Primary Care Development Division





CAREGIVERS' RESOURCE CENTRE

AICARE HUB

City Square Mall
#B2-19/20(next to B2 lift lobby)
180 Kitchener Road
S208539
11am – 8.30pm daily

CORPORATE WEBSITE

Agency for Integrated Care
www.aic.sg

AFFILIATED SITES

AIC Learning Institute
www.aic-learn.sg

AIC LinkedIn
www.linkedin.com/company/agency-for-integrated-care-singapore

Community Health Assist Scheme (CHAS)
www.chas.sg
1800-ASK-CHAS
(1800-275-2427)

Carers SG
www.facebook.com/CarersSg

ILTCareers
www.iltcareers.sg

Primary Care Pages
www.primarycarepages.sg

Singapore Silver Pages
www.silverpages.sg

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