

A Home to Age In

2017 Yearbook



A Home to Age In

Home, a place we are familiar with and most comfortable in. It is also where seniors prefer to age in, doing the things they love and surrounded with family and friends.

The Agency for Integrated Care (AIC) works together with our Community Care partners to build and develop a Care Community to support this aspiration. We provide support for their caregivers too, so that they can journey together with them.

For this Yearbook, we spoke to seniors and clients to find out more about how they are finding 'home' wherever they are. They range from clients who are living independently in the community to those who need care services.

It also records our highlights from January to December 2017 that supported them to live and age well.

VISION

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

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 AND CEO

Seniors are happiest at home among their family and friends. To enable seniors to do the things they love as they age, we worked closely with our partners in 2017 to build a supportive care community that puts seniors and caregivers first.

We expanded our reach into the community to connect those who need support and care to services. We did so through the Community Networks for Seniors (CNS) pilot in Tampines, Marine Parade and Choa Chu Kang. The CNS team works with the public sector, voluntary welfare and grassroots organisations to build a strong community support system for seniors regardless of their age or conditions. They link seniors back to Community Care services and financial assistance schemes where necessary. The recent merger of the Silver Generation Office with AIC strengthens this support system even more, with over 3,000 Silver Generation (SG) ambassadors in the community to engage seniors.

If you ask 77-year-old Mr Kee Kuang Yoh how CNS has made a difference for him and his wife,

you will hear Yong Si Hui's name mentioned many times. One of our CNS officers, she has been assisting Mr Kee since he was flagged for attention by a SG ambassador. She has helped him apply for subsidies for assistive devices like a hospital



Dr Jennifer Lee,
Chairman

bed, and arranged for medical escort and transport services for his medical appointments. Now because he feels better, he is also able to better care for his wife.

Si Hui continues to check in on Mr Kee through monthly phone calls. You can read more about Mr Kee's story in this book.

To provide seniors with timelier care, we improved its accessibility. We continued our efforts to expand the number of home and centre-based care places. Currently, there are over 8,000 home care places and about 5,000 centre-based care places available for seniors. We also improved care delivery in primary care. Primary care is the first and continuous line of care, and we work closely with the General Practitioners (GPs) to support those with chronic conditions in the community. The Primary Care Network (PCN) was one of the key initiatives we worked on this year. One of its benefits is that GPs receive support from nurses and care coordinators to manage the care of their patients with chronic conditions better. Patients also benefit from the team-based care the PCN brings about.

On top of making care more accessible, we created more care choices to support seniors ageing at home and strengthened

links between care settings so people can recover and manage their conditions in the community instead of in a hospital. One example was the Hospital-to-Home (H2H) programme we worked with the Regional Health Systems (RHSes) to roll out in the public hospitals. Patients enrolled in the programme receive care at home, e.g. medical and nursing care through home visits and telephone follow-ups. Their caregivers are supported through training and with information. The RHSes will also work with Community Care organisations to refer patients who need longer-term care, playing a more active role to move care beyond the hospital and into the community.

To support our partners in delivering better care, we have been working with them to increase and develop the pool of Community Care professionals who deliver the care, while continuously finding ways to do it better. Most are in this sector because of their passion to serve seniors and their caregivers. To empower them in



Dr Jason Cheah,
Chief Executive Officer

continuing what they love to do, we rolled out the Community Care Manpower Development Award (CCMDA) in 2017. The award provides funding for them to pursue higher training, upgrade their skills and develop their careers. A consolidation of the past study awards and scholarships we administered, CCMDA also expanded to cover more academic disciplines. It is part of our commitment to supporting our partners and their staff to grow so that we

can further our common vision of helping seniors age well.

The achievements in 2017 are a result of our partners' determination and strong support. It has been our continuing honour to work alongside Community Care organisations, grassroots volunteers, hospitals, general practitioners and other government agencies.

We would also like to acknowledge our Board, management and staff for their unceasing efforts in supporting our vision. We bid farewell and thank our outgoing Board members Mdm Chua Foo Yong and Mr Gregory Vijayendran for their contributions, and welcomed new Board members Dr Gerard Ee and Mr Jeyaraj Indra Raj.

This yearbook includes the stories of the clients we serve and how they are doing the things they love every day with the support of Community Care. They fuel our passion to continue doing what we do, and drive us to do our best. We hope you will be as inspired by their stories as we are.

2017 IN A GLANCE

FEBRUARY

- The first Senior Management Associate Scheme (SMAS) career fair was held to recruit management talents. In 2017, 47 talents joined the sector.



MARCH

- Over 60 nominations were received for the Model Caregiver Awards, an event to celebrate caregivers for their efforts in caring for their loved ones at home.



- The fifth anniversary of the Community Health Assist Scheme (CHAS) was celebrated together with General Practitioners.

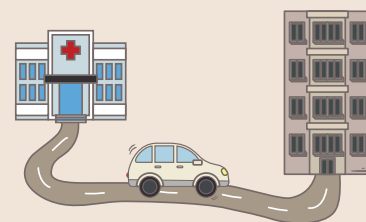


- First Touchpoint, a one-stop point of contact for those at risk or with mental health and other care needs, was announced. Over 1,800 have been supported.



APRIL

- The Hospital-to-Home Programme was launched by the Regional Health Systems (RHSes). Over 8,000 patients have benefitted.



- The National Advance Care Planning (ACP) IT system was launched for more seamless flow of information. Over 60 organisations have come onboard, and close to 8,000 ACPs have been published.

MAY

- The CHAS Carnival held at Bedok Town Square attracted over 2,600 people.



- The annual Intermediate and Long-Term Care (ILTC) Sector Workplan Seminar 2017 was held with more than 200 representatives from the sector and hospitals.

- The sixth AICare Link was launched at the Singapore General Hospital.



NOVEMBER

- uberASSIST was relaunched together with Uber. Over 800 drivers have been trained to assist seniors in getting around.



OCTOBER

- The Temasek Foundation Cares – Kampung Senang WHEELS Programme was launched, where active seniors repaired wheelchairs for lower income seniors living in Bedok and Tampines. Wheelchairs of 22 seniors have been fixed.

- Voice Out! Concert in the Park saw over 2,500 people coming together to commemorate World Mental Health Day.



AUGUST

- MOU signed between AIC and Nanyang Polytechnic to develop a gardening toolkit, as part of the AIC Wellness Programme.



SEPTEMBER

- Care professionals received study awards at the Community Care Manpower Development Awards Ceremony to support their career development.



MS LIM

MY FAMILY DOCTOR

48-year-old Lim Yee Wah sees her family doctor for her diabetes and credits their strong relationship for keeping her condition in check.

I was 18 then, and it sent a very strong message. I don't want that to happen to me.

I used to go to the polyclinic for my diabetes check-ups. After a while, I went back to my family doctor, Dr Tan, in Choa Chu Kang. I still visit him even though I've now shifted to Telok Blangah. Other doctors just don't know me like Dr Tan does. My whole family has been going to him since 1992 when we just moved to the area. He understands my behaviour and condition well, and knows what works for me. Plus, his clinic is under CHAS (Community Health Assist Scheme), so I can enjoy subsidies too.

Since his clinic tied up with the PCN (Primary Care Network) last year, I can do all my diabetic screenings at the clinic, like my eye and foot test and dietary counselling. That is really convenient for me. Serene, the nurse counsellor, also helps me to understand what different types of food do to my body, and what I should eat and avoid.

I don't think diabetes has affected my life too much but I do have concerns on its long-term effects. Currently, my blood sugar level is manageable and consistently within the recommended range. That's good as I don't want it to ever come to a stage where I cannot eat what I like. Thankfully, my husband and son have been

supportive. In fact, my son has become the gatekeeper of my diet. At 14, he's going through a phase where he's health-conscious and thanks to him,

I've also stepped up on my exercise routine.

My new motto is any exercise is good. I'm only 48 now, I want

quality of life, so I am actively taking care of myself.

- Ms Lim Yee Wah

“

The PCN allows GPs the chance to work with a team of nurses and care coordinators to support our patients with chronic conditions. For Yee Wah, after her screenings with the PCN Nurse Counsellor, I'll do



a review and adjust her medication accordingly. We don't just find the right medication for her, but also address her concerns such as her diet. My focus is simple, to have a friendship with my patient and journey together to better health.”

- DR TAN TZE LEE
GENERAL PRACTITIONER
AT THE EDINBURGH CLINIC

“

I aim to help patients improve in their lifestyle and dietary habits. I will take a history of patient's habits and assess patient's motivation



for change. Targets will then be set with the patients. In Yee Wah's case, I noted that she was not watching her diet enough. So, I went through with her the carbohydrates that can cause her blood sugar level to rise. She was very motivated to change and when I followed up with her, I was glad that her blood sugar level had improved.”

- SERENE ANG
PCN NURSE COUNSELLOR

PRIMARY CARE NETWORK (PCN)

The PCN supports participating General Practitioners (GPs) in delivering better care for their patients.

COMMUNITY HEALTH ASSIST SCHEME (CHAS)

CHAS provides Singaporeans with medical and dental care subsidies at participating GP and dental clinics. It is one of the financial assistance schemes we administer.

MDM BURKIS

ENJOYING MY FREEDOM

She used to only move within her neighbourhood. Now, 69-year-old Madam Burkis Binte Mohammed Ibrahim travels around the island with the help of uberASSIST.

now with uberASSIST, I can visit them anytime I like.

I normally do so on weekends because I am busy during the weekdays. I go to the market and do housework. I do everything myself at home – cooking, cleaning and housework. Every day, I also visit my second home,

the senior activity centre (NTUC Health SilverACE) at my void deck. Sometimes, I go in the mornings to join the exercise sessions and play games with my friends. I'll go home for lunch, and come back to chat with my friends until the centre closes.

My family will also book uberASSIST to take me to where



I have four children who live all around Singapore. One is in Toa Payoh, one in Hougang and two in Punggol. I've been living alone in Redhill since my husband passed away nine years ago. My children and grandchildren come and visit me when they are free.

In the past, I hardly went to their homes although they asked me to. I cannot walk very well and it's hard for me to get up the bus. But



I want to go. I'll just wait at the drop-off point near my block. I usually use uberASSIST at least twice a month. When there is a wedding to attend, I will take more trips.

The uberASSIST drivers are quite nice. There are times when my leg cannot really move well and they'll come over to help me get into the car. If they see that I'm carrying things, they'll also help me with them. The drivers will

usually chat with me during the trip, treating me as their friend.

Now, in a week, I spend time with my friends at the activity centre and get to see my family. I like that I can live on my own, but yet still connected to my friends and family.

– Madam Burkis Binte Mohammed Ibrahim

KEEPING SENIORS MOVING

Seniors who need to use cars or taxis to get around or visit eldercare centres now have an extra transport choice with uberASSIST.



In 2017, AIC worked with Uber to train uberASSIST drivers to assist those who need help getting in and out of the car.

MORE FAMILY TIME WITH MUM

MS SOH

With a trained Foreign Domestic Worker (FDW) to care for her 91-year-old mother with dementia, 57-year-old Mildred Soh can go to work with peace of mind.

a hip fracture. She lived with my brother for over 30 years until 2016 when I invited her to stay with me instead. My three children are adults now so I am in a good place to welcome her. My brother still had to juggle work and family commitments. Since my children and I all hold full-time jobs, I engaged a domestic helper to take care of her while we're at work.

Before she joined us, Minmin's employment agency sent her for eldercare training so she could help my mum get out of bed and onto her wheelchair for example. When Minmin came, I taught her how to take the bus with my mum to the hospital for her check-ups.



It's a joy for me to have breakfast on Saturday mornings with my mum. There are days when we'll drive from our home in Tampines to Bedok where the good food is. I have my helper, Minmin, to thank for that. She has really supported us in looking after my mum at home.

Mum found out she had dementia around six years ago. She also needs help getting around after

As Mum has frequent medical appointments, I'm thankful Minmin is around so that I can have peace of mind at work.

My mum has a daily routine. She used to love to take walks every day and would hang out with her kakis to play cards. Since she can't



play cards now, I want to make sure she still enjoys her walks. Every morning and evening, she'd go out for long walks with Minmin. As people with dementia may have irregular sleeping patterns, the walks help to regulate that.

With Minmin, we are relieved. I can concentrate at work during the week and look forward to our weekend breakfasts.

– Ms Mildred Soh



I've looked after Ah Mah for slightly over a year now. Before I came here, the course taught me how to carry Ah Mah from the chair to the bed properly, and how to shower her. At first, I couldn't understand her and Ah Mah couldn't understand me. But I kept trying and observing, and slowly learnt what she wants. My employer has been very supportive of me, so I'll always keep trying to understand Ah Mah.

– MINMIN SOE
FOREIGN DOMESTIC WORKER



SUPPORTING FAMILIES WITH FOREIGN DOMESTIC WORKERS (FDWs)

Those who need to hire a FDW trained in basic eldercare like Ms Soh can do so from participating employment agencies on the ElderCarer FDW Scheme. Families caring for their loved ones at home can also tap on training grants and financial assistance to support them.



MR YEE

THE COMMUNITY - WATCHING OUT FOR HIM

80-year-old Mr Yee Ah Kum, who has advanced dementia, enjoys what he loves to do – going for walks – thanks to his community's support.



In October 2017, my dad went missing for five days. He slipped away from his helper after going to the toilet during a walk. We searched all over but could not find him. We posted on Facebook about him going missing, hoping that our friends would share and spread the word. Eventually, someone who saw the post spotted my father in Whampoa and called me. I've never felt so relieved before.

Later, I found out that our Facebook post was shared on the Dementia-Friendly Singapore Facebook page. That was where the kind-



hearted person saw it. After that, someone from the AIC First Touchpoint team contacted me to check if we needed any support. They reviewed my father's needs and because we stay in MacPherson which is a DFC (Dementia-Friendly Community), our case was

shared with the DFC's partners to help keep a lookout for my dad. Now, Brahm Centre's staff will check in regularly on my father and chat with him. The grassroots leaders and the police will also keep an eye on him, now that they know about my father.

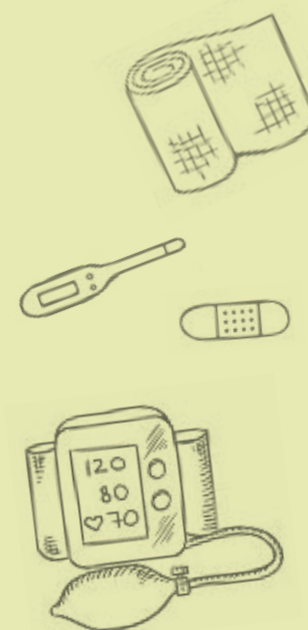
I'm thankful that the MacPherson community is so supportive of my dad. For example, he has this habit of taking forks and spoons from a nearby food stall. After I explained to the stallholder about my father's condition, he was very understanding.

At night, we go back to return the items dad took.

I feel more comforted knowing that there are people around my dad to help him, so that he can stay at home as he wishes. He can still enjoy the things he loves, and that's most important for me.

– Ms Anna Yee

My father was diagnosed with mild dementia around 2012 but that didn't stop him from enjoying what he loves, like going for walks, even though he got lost a few times. Otherwise, he'll get a little restless at home. So two years ago, I hired a helper to look after his daily needs and to accompany him during his walks.



Mr Yee and his daughter,
Ms Anna Yee.

COMMUNITY MENTAL HEALTH

Our efforts in the community aim to support those with dementia or mental health conditions as well as their caregivers. They include the First Touchpoint, DFCs, community outreach teams and more.

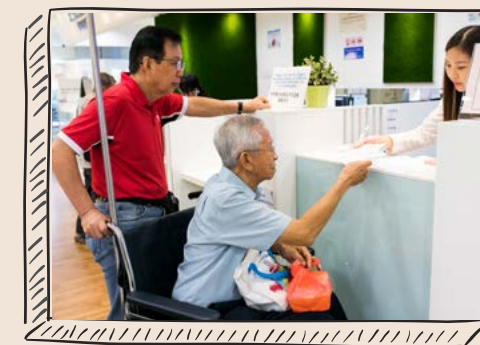
MR KEE

HAPPY TO BE AT HOME

A knock on the door brought the community together to support 77-year-old Mr Kee Kuang Yoh and his wife in ageing at home.

So, I do the cooking and cleaning at home. I also have glaucoma but I can still walk around, although it is a little difficult at times. In the last five years, I've had a gastric condition that made sleeping flat on a bed uncomfortable as I couldn't breathe properly. So I slept on a chair, which gave me backaches.

Last year, a PGA (Pioneer Generation Ambassador, now known as Silver Generation Ambassador) knocked on our door. I told him about our situation and asked if there was anything that can help us. I found out that I can get grab bars installed in my home to help my wife and I



Mr Kee being accompanied by a medical escort for his doctor's appointment.

move about easier. I managed to get subsidies for them. He also introduced me to Si Hui. With her help, I got a subsidised hospital bed so I can sleep more comfortably. I've been sleeping in it for over half a year and I can feel an improvement. My body feels better, and my back doesn't ache

My wife and I turned vegetarian around 20 years ago. Since then, I've enjoyed cooking vegetarian dishes for her. Every morning, we will go to the market to buy groceries. Once in a while, we'll catch up with our friends in the neighbourhood.

My wife has glaucoma and uses a wheelchair to get around. Her legs are weak due to her diabetes.



so much. I used to miss some of my doctor's appointments because I can't see very well. So Si Hui also got someone to bring me to the doctors.

Now that I feel better, I can better care for my wife too. I

will bring her out to have meals at nearby coffee shops, meet up with our neighbours and chat for a few hours. Activities like these brighten our day.

– Mr Kee Kuang Yoh

Since Mr Kee was first referred to us, the team connected him to various health and social services such as the SMF



(Seniors' Mobility and Enabling Fund), which allowed him and his wife to receive subsidies for assistive devices. We also provided Mr Kee and his wife befriending services through telephone calls, which gave Mr Kee the option to contact us should he require assistance. A befriender will also call to check on him monthly.

– YONG SI HUI
COMMUNITY NETWORKS FOR SENIORS (CNS) COORDINATOR

COMMUNITY NETWORKS FOR SENIORS (CNS)

The initiative aims to build a strong community support system for seniors to live and age well at home.

SENIORS' MOBILITY AND ENABLING FUND (SMF)

SMF provides subsidies for seniors who require assistive devices, transport services and home healthcare items.

MDM PANG

GAINING STRENGTH
FROM REHABILITATION

77-year-old Madam Pang Guay Lian is regaining her ability to move on her own thanks to weekly rehabilitation and her physiotherapist “grandson” Faizal.

As a result, I could not walk. After hospitalisation, I went to a community hospital where I spent another month recovering through rehabilitation.

After I was discharged, I was linked up with the HWA (Handicaps Welfare Association) rehabilitation centre near my home in Boon Lay to continue my therapy. I move around in a wheelchair, so HWA arranges for their transport van to fetch me to and from my therapy sessions.

I have been visiting the centre twice a week for over a year. Each session lasts for two hours and Faizal, my main therapist, has been very patient with me. I really appreciate it. I even call him my “grandson”!

During my physiotherapy sessions, Faizal will guide me while I do leg and hand cycling. Then, we’ll walk up and down the staircase. I will also do hand exercises like opening and closing my fingers. Sometimes, the centre will also organise cooking sessions for us as part of our



therapy. They know that I love to cook for my family but I haven’t been able to since my fall. So, the therapists brought some of us out to buy ingredients, and we’ll come back to make simple stuff, like kuehs.

On days that I am at home, I exercise, walking up and down and doing my hand workout. I also watch TV shows – my favourite are the Channel 8

dramas. On weekends, my daughter will bring me on outings with her family.

I’m thankful that I am getting stronger. Also, the people at the centre are very nice, especially my “grandson” Faizal. All of them respect me, so I must respect them by improving. I treat them just like my family.

– Madam Pang Guay Lian

Mdm Pang is very positive and open towards therapy. Watching her improve is very satisfying and confirms I made the right choice to join this sector. I started working as a physiotherapist after completing my diploma in 2015. I want to serve my clients better so I decided to go for my physiotherapy degree. The CCMDA (Community Care Manpower Development Award) provided an



opportunity for me to do so, and develop my career.

– MUHAMAD FAIZAL BIN ZAINI
PHYSIOTHERAPIST

CENTRE-BASED
CARE SERVICES

Centre-based care plays an important role in supporting seniors to age well in the community. Found in the neighbourhoods, services offered at centres range from day care, dementia day care to day rehabilitation, and more.

COMMUNITY CARE
MANPOWER DEVELOPMENT
AWARD (CCMDA)

This award, rolled out in 2017, offers funding support for existing and new Community Care staff to go for training to develop their skills and careers to better contribute to the sector.

APPRECIATING THE OUTDOORS, AGAIN

MR CHUA



With the help of home therapy, 88-year-old Mr Chua Seo Poh regained his ability to walk after a spine fracture and can now enjoy his daily activities again.

five years ago. My neighbour found out about my situation and linked me up with THC (TOUCH Home Care). I get my lunch and dinner sent to my home, and someone from THC comes around once a week to help clean my house. When I have medical appointments, they will arrange people to accompany me to the hospital and back.

Around two years ago, my back was so painful that I could not sleep. It turned out that I had a compression fracture in my spine, and I was hospitalised for around two months. When I returned home, my back still gave me problems and I couldn't

get out of bed without my flat mate's help. When the THC staff came to do housekeeping, they noticed my frustration. I really wanted to get better and



not stay in bed every day. So, they arranged for a therapist to visit me and teach me exercises to strengthen my muscles.

I'm easily contented. It is enough when I can go to Toa Payoh Central every afternoon to meet my friends for tea and chit chat.

I live in a one-room flat in Toa Payoh with a flat mate. I've got back problems on and off for a while now and had fallen a few times before. I used to be able to cook for myself, but with my falls, I wasn't able to. That was around



Doreen, is very good. Knowing that I used to go for walks, she went downstairs with me to the exercise corner and taught me what exercises to do. I still do them daily.

After eight sessions, I could go out on my own to meet my friends at Toa Payoh Central. I am happy. I can walk by myself, carry on with my daily routine and spend time with my buddies.

- Mr Chua Seo Poh

I find new ways for Mr Chua, given his medical condition, to go about doing his daily activities. I know that he likes to go outdoors, take walks and visit the nearby Toa Payoh Central. So, together with the physiotherapist, we personalised his therapy to include moving around in his neighbourhood as well. We walked with him from his doorstep to the bus stop and even took the bus together. We guided him along, such as taking note of the curbs and railings he can use for support, to increase his safety and confidence in going out again. Mr Chua's drive to get better was very strong and I am glad to see him happy doing the things he enjoys again.



- DOREEN ANG
OCCUPATIONAL THERAPIST

HOME CARE SERVICES

Home care comprises a range of eldercare services brought to seniors' homes. Services include medical care, nursing, therapy and personal care, e.g. assistance in daily activities and personal hygiene. Services such as Meals-on-Wheels and Medical Escort and Transport are also provided.

GETTING CARE AT HOME AND IN THE COMMUNITY

MR LIM



79-year-old Mr Lim Thye Hong engaged integrated home and day care services for his late wife, 73-year old Mdm Goh Sai Gek, who had diabetes and related conditions. Mr Lim is now receiving similar services after his wife passed on.

My wife had diabetes and her right leg was amputated over 10 years ago. She used a wheelchair and I would help her get in and out of it, onto the bed or sofa.

In the last two years, my wife became weaker. I've had knee replacements in both legs and it became more challenging to care for her, especially with the transferring. During one of our hospital visits, the staff suggested home and day care services for her. That's when the people from AWWA started visiting us to help care for my wife.



Mr Lim and his wife, Mdm Goh, in their earlier days.

AWWA staff would shower her, pack her medicines and remind her on medical appointments. They also clean our house once a week. My wife went to their day care centre for activities, like arts and crafts and exercises. I had

some time for myself too when she was at the centre.

In September 2017, my wife had heart failure and passed on. Since then, I've been living alone but AWWA continues to visit me once a week to pack my medication and check my blood pressure. I have hypothyroidism and the medicines help to keep it under control. Whenever I have polyclinic appointments, Petrina will accompany me. I'm

glad that she is around. If my condition gets out of control, I would get weak and possibly fall. That would be a big problem.

AWWA was concerned about me being lonely and asked me to join their centre where I can spend time with other seniors. Their van will fetch me in the mornings. At the centre, I like to play cards and memory games. After lunch, their van will send

me back and I'll go to the coffee shop near my block and meet my kopi kakis.

I'm still pretty healthy for my age, and I want to keep it this way. I'm happy with my daily routine now where I can spend time with friends. I've nothing else to ask for.

- Mr Lim Thye Hong

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I monitor Mr Lim's health and make sure that he takes his medication on time by calling him every day. I also pack his medicines once a week. We've noticed that he's become more forgetful lately, so

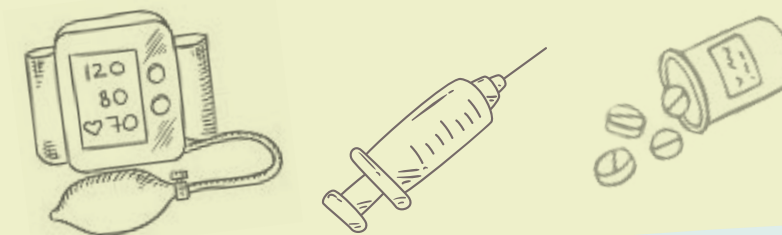
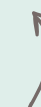


these reminders are important. When I visit, I will chat with him or sometimes have lunch together. More than just medical care, we also want to be a friend. At AWWA, we care for seniors with little or no caregiving support so that they can age at home. ”

- PETRINA ONG
REGISTERED NURSE

INTEGRATED HOME AND DAY CARE (IHDC) PACKAGE

As part of IHDC, Community Care providers offer a mix of home and centre-based care services to cater to the different needs of their clients.



MR ARJAN

RELISHING MY GOLDEN YEARS AND GIVING BACK TO THE COMMUNITY

86-year-old Mr Arjan Tahilram Daswani found an alternative care option for himself when his foreign domestic worker went on a two-week break.

As I grow older, I started to experience health problems. Sitting in front of the computer most of the time caused me to put on weight. My legs get swollen often due to the lack of exercise, so my mobility is limited. To help with my daily needs, my eldest son, who I live with, has hired a helper to look after me since 2002. The Foreign Domestic Worker Grant helps us offset the cost of hiring the helper.

When my current helper went for her two-week leave, my son was concerned about how I could cope. She's been my capable assistant for the past two years. After discussing, we



Mr Arjan consulting an AICare Link Care Consultant at Khoo Teck Puat Hospital.

decided to try short-term care at a nursing home for this period.

As I have diabetes and high blood pressure, I visit Khoo Teck Puat Hospital regularly for my medical



appointments. It was through asking around during these visits that I learnt about AICare Link at the hospital and paid them a visit.

The care consultants at AICare Link were helpful. After I told them I wanted the nursing home to be near my place, they gave me three options. Before I decided, I visited them to check out their facilities. I was impressed with the Sree Narayana Mission Home. I liked the way they took time to explain everything to me. So, I decided to spend my two weeks there. AICare Link's consultants organised my stay there, taking care of the administrative work. Both my son and I were thankful for them so he could focus on work.

I enjoyed my stay at Sree Narayana Mission Home. I brought my tablet along so I could check my emails occasionally. I can't see very well so I asked the staff there to help me if I needed. In fact, they taught me how to use certain functions which I was not familiar with! There were also visits by some students on a school trip and I had a great time chatting with them.

After my helper came back, I'm back to my routine of community work. But I think I'll cut down a little, and spend more time relaxing and catching up on shows. I love watching movies, especially Hindi ones.

– Mr Arjan Tahilram Daswani

AICARE LINK

AICare Link is an info resource centre for seniors and caregivers on care advice and information.

RESPITE CARE

Families who need short-term caregiving assistance can tap on respite care services, which is available at selected eldercare centres and nursing homes.

THE FOREIGN DOMESTIC WORKER (FDW) GRANT

This scheme provides financial assistance to families who hire an FDW to care for their loved ones at home.

MDM FOONG

A HOME AWAY FROM HOME

80-year old nursing home resident Mdm Foong Siew Toh has dementia. But she stays active and engaged thanks to Ling Kwang Home for Senior Citizens' emphasis on quality care.

When I told the staff I like to plant flowers, they got flower seeds and herbs for me to grow. There's a nice garden here and I like to spend time looking after my flowers. I even grow spring onions, which I use to cook with eggs. Sometimes, I also cook more dishes like beehoon and burbur cha cha.

I'm enjoying my time here more and more with the many activities. Every morning, I wake up, have breakfast and then help out by clearing the tables for my friends. Then I'll sit by my plants and make sure they are doing okay. I also have friends to chat with and spend time together.



On Sundays, I go to the church next door. Once a month, we also have a special outing. Recently, we went to Chinatown.

This place is like my home with many friends around. I am happy to be here.

- Mdm Foong Siew Toh

After I came here, the staff chatted with me to find out what I like to do. I told them I liked having a job. I used to be a part-time cleaner, clearing cups and dishes. So they asked if I would like to help out at the cafeteria. After my friends finish their food, I clear their dishes and wash up. This makes me feel good because I feel useful and I'm doing something familiar.



For residents like Mdm Foong who have dementia, we come up with activities that provide a sense of familiarity and routine. This is important for their wellbeing. Our staff are dedicated and love spending time with the residents. This impressed me when I first joined Ling Kwang Home last year after switching from a different industry.

I wanted to free up more time for them with residents. Coming from a logistics background, I had knowledge of structures and processes to improve operations. So I refined the care flow, making operations more time efficient. For instance, I did an exercise

with staff to pen down the stages of care they provide for residents right from when they join us. It was something they were already doing but I made it routine. This way, care is not disrupted even if staff switch job roles.

Joining a different industry mid-career can be daunting, but the SMAS (Senior Management Associate Scheme) which prepared and placed me at the home allowed for a smoother transition.

- MICHAEL LIM
CHIEF OPERATING OFFICER OF LING KWANG HOME FOR SENIOR CITIZENS

QUALITY IMPROVEMENT

Nursing homes and eldercare centres are constantly improving their quality of care. For example, Ling Kwang Home for Senior Citizens introduced a "My Story" profile for residents with dementia, detailing their likes, interests and habits. Staff refer to it to customise the care for each resident. They also conduct activities under the AIC Wellness Programme to enhance the residents' wellbeing.

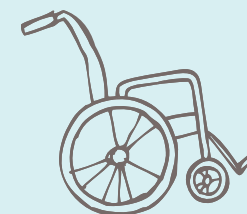
SENIOR MANAGEMENT ASSOCIATE SCHEME (SMAS)

The scheme was introduced to recruit leadership talents into the Community Care sector to support its growth and development.

Our Achievements



Together with our partners, we have supported our clients in living and ageing well at home, in the community. We also strengthened partnerships to raise the bar in quality, innovation and productivity in the Community Care sector. There were also opportunities for our dedicated care professionals to grow in their careers.

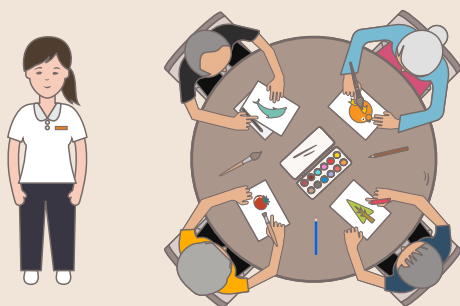


Take a look at the key initiatives, programmes and schemes done in 2017.

HOME AND CENTRE-BASED CARE SERVICES

A range of Community Care services supports seniors and their caregivers in ageing well at home, in the community.

Senior Care Centres



Over 100 centres islandwide offer day care, therapy and basic nursing services as well as social activities for frail seniors or those with dementia. In 2017, about 5,000 such places were available. Transport to and from home can be arranged if needed. While their loved ones are at day care, caregivers can work or take a break from caregiving with peace of mind.

Home Care Services



For seniors who are homebound or prefer to stay at home, medical, therapy and nursing services are brought to their doorsteps. Other services include meals delivery for those who are unable to buy or prepare their meals, and medical escort and transport services to accompany seniors without caregivers for their medical appointments. Seniors can also get support for personal care, e.g. assistance with personal hygiene and housekeeping. As of December 2017, there were **over 8,000 home care places** available offered by 30 service partners.

Care Close to Home

Care teams made up of a case manager, health and social care support staff are stationed at HDB rental blocks to keep an eye on seniors who are alone or have little or no caregiving support. The teams monitor their medical conditions, remind them on their medication and doctor's appointments and assist in daily living activities if needed. **Over 2,500 seniors** were supported by such care teams in 11 locations as of 2017.

Singapore Programme for Integrated Care of the Elderly (SPICE) Integrated Home & Day Care (IHDC) packages

These two services are for seniors with a high level of care needs and qualify for entry into nursing homes, but who prefer to live in their own homes with the help of community services and their caregivers. As of December 2017, **over 730 SPICE clients** and **over 360 IHDC clients** have benefitted from a customised mix of home and centre-based care services, tailored to their conditions, across 15 centres. Because seniors and their families only need to speak to one service provider for all their needs, it provides more reassurance for them.



Community Case Management Service

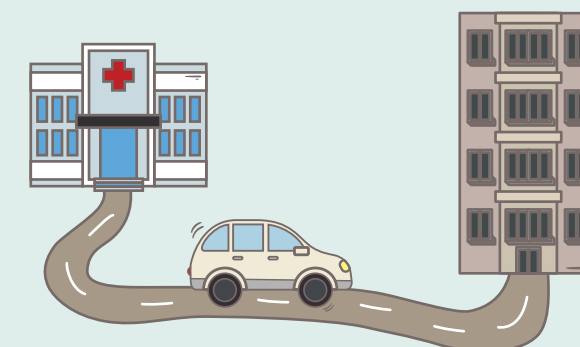
Case managers coordinate relevant social and healthcare needs in the community for frail seniors who find it difficult to manage their various conditions. This helps them to cut down on unneeded hospital visits. **Over 250 seniors** have been supported as of 2017.

Interim Caregiving Service (ICS)

As of 2017, **more than 5,000 people** have benefitted from the support of a caregiver to assist them at home with their daily living activities for up to two weeks after their hospital discharge. This allows families of those who need longer-term care more time to make needed arrangements.

Hospital-to-Home Programme

Since 2017, this programme by the Regional Health Systems (RHS) has helped **over 8,000 patients** to smoothly return home after hospitalisation. The RHSes coordinate medical, nursing and social care services offered by hospitals and Community Care providers for the patients at their homes. The care teams will also do home visits and phone calls to check in on the patients.



CAREGIVER SUPPORT

We support caregivers in their journey of caring for their loved ones, so seniors can age well at home.

Eldercarer Foreign Domestic Worker Scheme



Under this scheme, families can hire a domestic helper who has gone through basic eldercare training to support with caregiving at home. The training equips them with relevant skills to provide day-to-day care needs such as showering and moving around. As of 2017, **more than 270 families have hired helpers** from close to 40 participating employment agencies.

Supporting Seniors in Getting Around



Seniors can move around on their own more with the launch of uberASSIST and the Temasek Foundation Cares – Kampung Senang WHEELS programme.

In November 2017, AIC worked with Uber to launch uberASSIST service to the public. More than 800 drivers were trained to help seniors on wheelchairs enter and exit the vehicle, making this mode of transportation easily accessible to such seniors. The drivers also learnt how to communicate with people with dementia.

The WHEELS programme engaged active seniors to repair wheelchairs for lower income seniors living in Bedok and Tampines. In 2017, **22 seniors** had their wheelchairs fixed under the programme.

Respite Care

Respite care services support caregivers who need to take a break from caregiving. Those who need short-term caregiving assistance, from a few hours to 30 days, can tap on respite care services. They are available at selected day care centres and nursing homes. As of 2017, **over 1,600 people** have tapped on them.

AICare Link



AICare Link is a one-stop resource centre for those seeking advice and assistance on care services and schemes to walk in. The care consultants at the seven AICare Links, located at the public hospitals and at Maxwell Road, serve **around 5,000 seniors and their caregivers** each month.

Singapore Silver Line



The national eldercare helpline received **over 180,000 enquiries** as of 2017. It offers assistance in four major languages and dialects.

Singapore Silver Pages



The website hosts information on health and social care, caregiving resources and financial assistance available to help seniors and their caregivers make informed care decisions. It had **close to 280,000 visitors** in 2017.

Info-booth @ Polyclinic

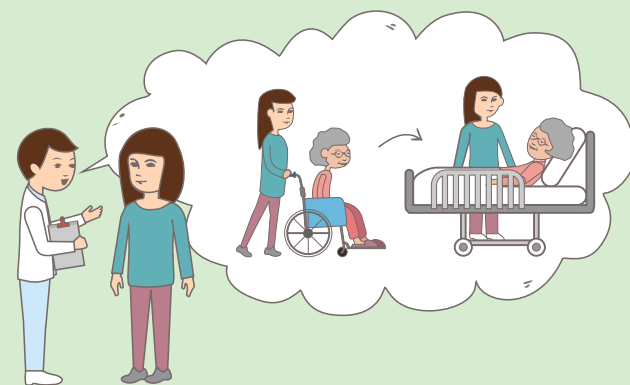
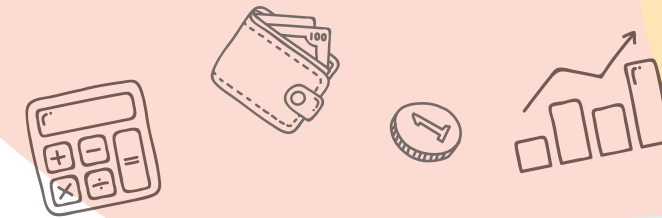
Staff at the booths engage polyclinic-goers on eldercare services and schemes that can benefit them. **Over 9,000 people** have been engaged as of 2017.

Eldercare Stands

As of 2017, **over 150 stands** carrying information on eldercare services and schemes have been placed island-wide at community centres, polyclinics, hospitals, etc. This makes it easier for members of the public to pick up needed information.

FINANCIAL ASSISTANCE SCHEMES

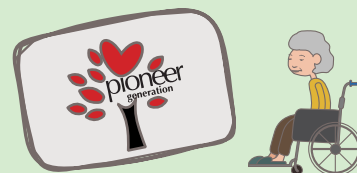
We administer various financial assistance schemes to support families in caring for their loved ones.



Caregivers Training Grant

The grant offers \$200 annually for caregivers to attend approved training courses to learn how to better care for their loved ones. **Over 240 training courses** are available covering day-to-day care, caring for loved ones with dementia or a disability, etc. In 2017, **about 8,000 caregivers have tapped on the grant.**

Pioneer Generation Disability Assistance Scheme



Pioneers who require permanent assistance with three or more Activities of Daily Living can receive a monthly grant of \$100. As of 2017, **about 45,000 Pioneers have received the monthly payouts.**

Foreign Domestic Worker Grant

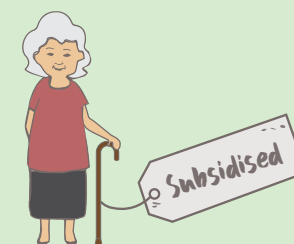
Families who hire domestic helpers to assist with caring for their loved ones may receive \$120 each month if they are eligible. Their loved ones must need permanent assistance with three or more Activities of Daily Living. **About 19,000 families have benefitted as of 2017.**

Interim Disability Assistance Programme for the Elderly

The scheme provides eligible seniors with severe disability with either \$150 or \$250 monthly payout for up to 72 months. As of 2017, **more than 8,000 seniors have received the payout for their care needs.**

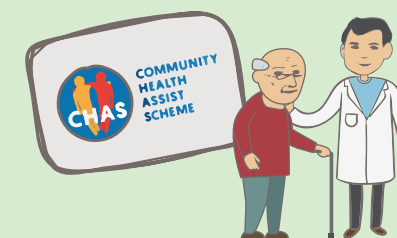


Seniors' Mobility and Enabling Fund



The scheme provides subsidies for assistive devices such as wheelchair and walking sticks, home healthcare items such as diapers and milk supplements, and transport to approved eldercare and dialysis centres. In 2017, **over 19,000 seniors benefitted from SMF.**

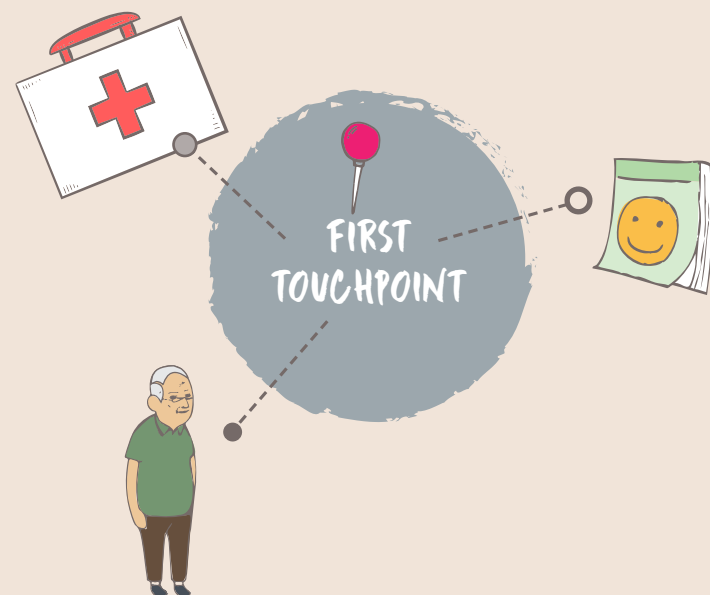
Community Health Assist Scheme (CHAS)



This scheme enables Singapore Citizens from lower- to middle-income households and Pioneers to receive subsidies for medical and dental care at participating General Practitioners and dental clinics. In 2017, **about 1.3 million Singaporeans have benefitted from the scheme.**

COMMUNITY MENTAL HEALTH

Our efforts aim to build a community supportive of those with mental health needs and their caregivers through awareness, education, improving the availability of care services and linkages to them.



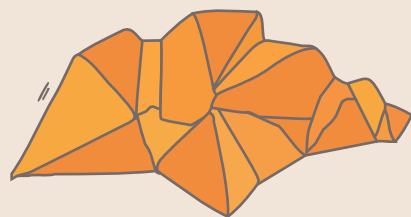
First Touchpoint

AIC acts as the first, and one-stop, point of contact for people at risk or with mental health and other care needs. We provide them with information and care coordination, linking them up to necessary social and healthcare services in the community. As of 2017, we have **supported over 1,800 cases**.

Dementia-friendly Community (DFC)

Stakeholders in six DFCs are coming together to make their communities more dementia-friendly for residents with the condition and their families.

Thanks to their efforts, **over 23,000 people are now aware of dementia**, its signs and symptoms and how to communicate with people with dementia. A network of over 60 Go-To Points island-wide acting as resource centres put out information on the condition and act as "safe return" points for persons with dementia who are lost. Staff at these points can also link those who need help to relevant dementia-related support and services.



Community Outreach Teams

These teams, through their outreach, raise awareness of dementia and mental health conditions, identify those at risk early, link them up to appropriate services provide them and their caregivers with basic emotional support and preventive care activities. As of 2017, 33 teams have **reached out to over 150,000 people** in the community.



Mental Health in Primary Care

Over 8,800 clients have been served by the over 140 partnering GPs and doctors in eight polyclinics near their homes for their mental health needs in 2017. These GPs and polyclinics see and treat not only their patients' mental health needs, but also any chronic health conditions. If needed, they will refer their clients to specialist care in the hospitals. The GPs are supported by 16 allied health-led community intervention teams who provide counselling and psycho-social interventions such as emotional and mental wellbeing, to clients and caregivers.



COMMUNITY OUTREACH

We actively reach out to the community, engaging them in various initiatives and annual events.

Community Networks for Seniors

The initiative aims to build a strong support system for seniors to live and age well at home. It encourages seniors to take part in active ageing activities, befriends seniors who are lonely and links them up to care service if needed. As of 2017, it has **reached out to 70,000 seniors** aged 65 and above in Tampines, Marine Parade and Choa Chu Kang Group Representation Constituencies.



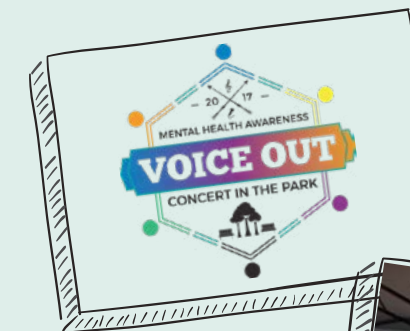
Community Health Assist Scheme (CHAS) Carnival 2017

Around **2,600 people** attended the carnival at Bedok Town Square on 14 May 2017. Besides promoting CHAS, the carnival also highlighted the importance of a healthy lifestyle and regular health screenings with their family doctors.



Voice Out! Concert in the Park

On 7 October 2017, **over 2,500 participants** came together to commemorate World Mental Health Day. The concert was held to raise awareness of mental health issues, combat against the stigma surrounding it, support those with such conditions and encourage them to voice out their need for help. 10 local artistes who were also mental health advocates performed at the event, including international pop star Stefanie Sun.



Model Caregiver Awards 2017

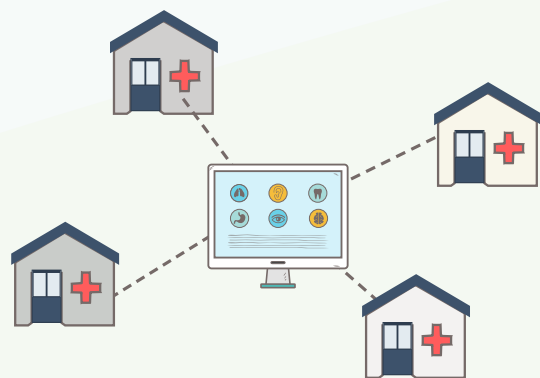
The Model Caregiver Awards on 25 March 2017 received **over 60 caregiver nominations** from close to 20 agencies in the community and social care sector. The event celebrated caregivers for their efforts in caring for their loved ones at home. Spearheaded by AWWA, we were one of the supporters with the National Council of Social Service and other community partners.



PRIMARY CARE

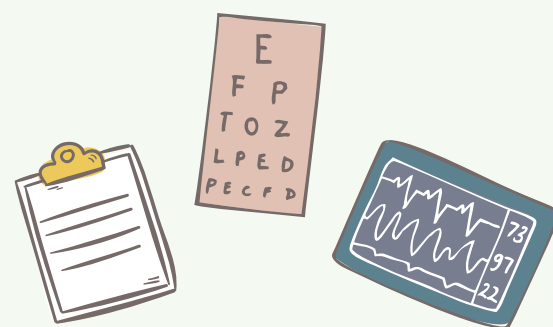
We work closely with General Practitioners (GPs) to strengthen our primary care sector as the first and continuous line of care.

Primary Care Network (PCN)



GPs in a PCN network can tap on shared resources such as administrative and manpower support. They work with nurses and care coordinators to better manage and monitor their patients with chronic conditions. As of December 2017, **over 12,000 patients** were managed by two PCNs. The number of networks increased from two to 10, supporting more than 300 GPs island-wide.

Enhanced Screen-for-Life (SFL)



The national programme offers subsidised health screening for eligible Singaporeans and Permanent Residents. It is available at all clinics under the Community Health Assist Scheme (CHAS) since 1 September 2017. **Over 80%** of CHAS clinics have conducted SFL screening for their patients.

SECTOR ENGAGEMENT

We organise platforms to bring our sector's partners together to network, learn from each other, and recognise one another's efforts.

ILTC Workplan Seminar

The annual ILTC Work Plan Seminar took place on 19 May 2017. **More than 200 participants** from the Community Care sector and the Regional Health Systems attended the event. Participants heard from distinguished speakers on national trends, key thrusts and shared best practices to prepare our sector for the increasing needs of our ageing population.



Community Health Assist (CHAS) General Practitioner (GP) Appreciation Lunch

The event, held on 25 March 2017, celebrated the fifth anniversary of the scheme and recognised GPs for their dedication in patient care and support towards the scheme. 135 GPs attended this milestone event.



MANPOWER DEVELOPMENT

We support our Community Care in developing their workforce and attracting more to join our sunrise sector.

Community Care Manpower Development Award



Rolled out in 2017, **60 awards** were given out to support Community Care professionals in their career development through formal education. The award covers entry and advanced skills training via short courses, formal academic programmes and attachments to healthcare and Community Care facilities. It consolidates various study awards that was administered by AIC previously.

Training for Community Care staff



The **AIC Learning Institute** offers skills-based training in topics like nursing care for Community Care staff to deepen their skills to better care for their clients. In 2017, we offered more than 4,000 training places across 65 courses.

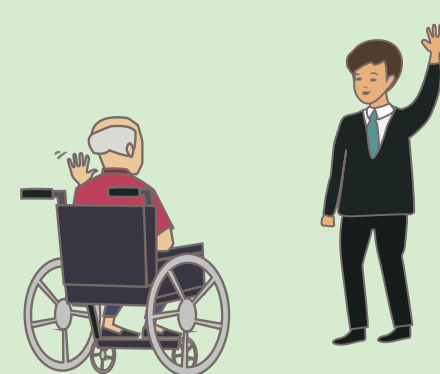
To develop the next generation of community care leaders, we also organise **INSIGHT and IMPACT Leadership Programmes** for management-level staff to hone their leadership skills. In 2017, over 80 participants attended the two programmes.

Community Care Training Grant

Over \$1.7million was committed in 2017 to fund Community Care professionals from **over 100 organisations** in going for training, both local and overseas. This includes workshops and conference seminars.



Senior Management Associate Scheme (SMAS)



Introduced to recruit management talents looking to make a mid-career switch, this scheme offers a training and induction programme to familiarise them with the sector. **47 talents** joined in 2017 under this scheme.

Manpower Recruitment



In 2017, recruitment efforts went online as well, with a dedicated platform to share more about the Community Care sector, career opportunities and available schemes to tap on. Job fairs and Skillsfuture roadshows were also jointly organised, with walk-in interviews for those interested. **More than 800 Singaporeans** have been placed with some 29 aged care service providers in 2017.

Community Care Traineeship Programme

Open to fresh entrants and in-service staff, the programme combines classroom, practical sessions and on-the-job learning to prepare them to assist healthcare professionals in nursing care or therapy sessions. As of 2017, it has successfully placed **close to 40 participants** in support care roles.

QUALITY IMPROVEMENT AND PRODUCTIVITY

We support our Community Care partners in their ongoing efforts to improve the quality and the value of care they deliver.

AIC Wellness Programme



In 2017, we worked with new partners such as Nanyang Polytechnic, Youth Corps Singapore and PAP Community Foundation to roll out new activities involving gardening and intergenerational bonding. We also began new arts-based activities such as drumming with our long-term partner, the National Arts Council.

Over 450 staff from about 100 eldercare facilities have undergone training in the five activities under the AIC Wellness Programme, in order to facilitate these activities for their clients. The aim is to use evidence-based activities to positively impact clients' wellbeing and offer opportunities for them to pick up new skills and interests.

Nursing Home IT Enablement Programme (NHELP)

NHELP was implemented in **15 nursing homes** in 2017. The IT system automates and integrates processes and paperwork in various clinical and administrative areas, allowing staff to pull out residents' information quickly and easily.



Nutrition Movement



Four cooking training sessions were conducted in 2017 for **100 Community Care cooks** from 35 organisations. The cooks picked up tips on preparing food that is not only nutritious, but also looks and tastes good. Cooks also learned from one another through the Share & Cook programme, creating nine new recipes that were shared with other nursing homes in the sector.

Service Quality Toolkit & Roadshow

A Service Quality Toolkit was created based on inputs from a group of Community Care providers. Eight roadshows were held with **over 850 staff** from 37 organisations participating to strengthen their service quality skills using the toolkit.

Quality Improvement Collaboratives

Process Improvement

13 nursing homes worked together to improve the way they deliver daily care. Two processes were enhanced – showering and nasogastric tube (NGT) feeding. It improved patient safety and dignity while freeing up more time for staff to spend on other care activities.

Hand Hygiene Project

10 nursing homes and centres participated in a project to improve compliance with best practices for hand hygiene. After five months, the participants averaged a 35% improvement in following the guidelines on when hands should be cleaned to prevent the spread of infections.

Programme on Quality for Community Care Leaders

Two sessions were facilitated by the Institute for Healthcare Improvement (IHI) to guide senior management and board members of Community Care organisations on their roles in improving quality and safety. The **94 participants** who attended developed action plans to be implemented in their care settings.

Basic Safety Quality Indicators Interest Group

11 nursing home organisations worked together to develop ways of measuring safety for their residents. They continue to collect data and exchange ideas on how to further improve their safety practices.

Emergency Preparedness

Two readiness exercises were held for nursing homes to practice their responses to various emergency scenarios. To date, **89% of nursing homes** have participated in AIC-led readiness exercises.

Advance Care Planning (ACP) IT System

The Advance Care Planning IT system electronically documents details of the ACP conversation between care providers and clients. It is directly integrated with the public hospitals' Electronic Medical Records (EMR) systems and the National Electronic Health Record (NEHR) system, enabling providers to create, update and share ACPs seamlessly across settings. This ensures portability and continuity of clients' wishes. **Over 50 organisations** are on board and **close to 8,000 ACPs** have been published to date.

SECTOR GRANTS

We administer a range of grants for Community Care partners to support their efforts to provide better quality care.

Tote Board Community Healthcare Fund

As of 2017, the fund has awarded **around \$145 million** to not-for-profit organisations and charities to implement programmes that aim to improve public health, enhance the scope and quality of Community Care services and embark on new pilots. This is so that Community Care providers can better support seniors to age in the community.



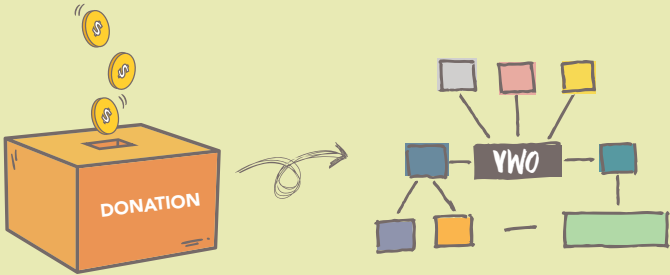
Healthcare Productivity Fund

Over 30 Community Care organisations tapped on this grant in 2017 to support their efforts to improve productivity through technology and redesigning jobs or processes.

HPF Initiative	Progress to date
Community Health Improvement and Productivity Scheme (CHIPS)	We administered funding for 155 projects to improve efficiency and ease laborious tasks, each providing at least 10% improvement in productivity. To date, 80% of nursing homes have tapped on this funding.
Bulk Procurement	We worked with 40 care providers to combine purchases for 27 products and services for greater savings. Together, we have saved more than \$4 million as of 2017.
Job Redesign	We helped care teams adjust roles for better productivity and job satisfaction. As of 2017, we have redesigned four nursing, three therapist, and two medical social worker roles.
Business Process Redesign	We administered funding for 55 projects completed at 46 care sites with at least 10% man-hours savings per project.



Community Silver Trust



This is a dollar-for-dollar matching grant to encourage donations to Voluntary Welfare Organisations (VWOs) in the Community Care sector to build up their capabilities and programmes. As of 2017, **over \$400 million** has been disbursed to more than 80 VWOs.

ILTC Research Grant



This grant has provided **about \$500,000** to four projects with innovative ideas to improve care and its delivery for the Community Care sector.

Care-At-Home Innovation Grant



Four applicants were awarded the grant, which partners health or social care providers with providers of technological solutions to enhance delivery of long-term home care services.

OUR CONTRIBUTORS

“ Thank you to our partners!

Our achievements were made possible with your advice, guidance and contributions. It is a privilege to be able to work together with you to build a vibrant care community for seniors to live and age well. ”

ADVANCE CARE PLANNING STEERING COMMITTEE

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Prof Pang Weng Sun
Deputy Group Chief Executive
Officer (Population Health),
National Healthcare Group

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MEMBER

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Singapore General Hospital

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Kheng Leng David**

Senior Consultant,
National Heart Centre

A/Prof Cynthia Goh

Senior Consultant & Head,
Department of Palliative Medicine,
National Cancer Centre

Dr Hong Wei Wei

Assistant Director, Hospital
Services Division, Ministry of Health

Dr Kok Mun Foong

Chief, Home & Community Care
Division, Agency for Integrated Care

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St Andrew’s Community Hospital

MEMBER

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and St Luke’s ElderCare
Chairperson, Star Shelter, Singapore
Council of Women’s Organisations

Mr Mohd Ali Bin Mahmood

Chief Executive Officer,
Persatuan Pemudi Islam Singapura

Ms Lee Yoke Lan

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Mr Tan Kim Kwang

Group Human Resource Director,
Ezion Holdings Limited

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Chief Executive Officer,
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CO-CHAIRMAN

Mr Tim Oei
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National Kidney Foundation

LEAD, WORKFORCE INNOVATION TASK FORCE

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Chief Executive Officer,
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(Till Jun 2017)

Mr Bart Lim

Deputy Executive Director,
St Joseph’s Home

SKILLS STANDARDS TASKFORCE

SKILLS STANDARDS TASKFORCE LEAD

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Allied Health Professional Group,
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Ms Judy Yong

Head, Human Resource,
NTUC Health

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WORKFORCE INNOVATION TASKFORCE LEAD

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MEMBER

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Executive Director, Singapore
Association for Mental Health

Ms Ling Bee Sian

Director of Nursing,
Vanguard Healthcare

Ms Ng Lay Ling

Head of Rehabilitation,
St Luke’s ElderCare Ltd

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Chief Executive Officer,
Agency for Integrated Care

MEMBER
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Deputy Chief Executive Officer
Agency for Integrated Care
(Till Nov 2017)

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Ms Ng Gaik Nai
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Changi General Hospital

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Medical Consultant,
Yishun Community Hospital

Dr Chua Chi Siong
Medical Director,
Jurong Community Hospital

Ms Florence Cheong
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CUSTOMER EXPERIENCE
WORKGROUP

MEMBER
Mr Sairam Azad
Strategic Advisory Committee
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(SAC-QI) Member,
Assistant Director, AWWA Ltd

Ms Chin Soh Mun
Strategic Advisory Committee
for Quality Improvement
(SAC-QI) Member,
Director of Nursing,
Dover Park Hospice

Ms Jenny Sim
Strategic Advisory Committee
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(SAC-QI) Member,
Group Director Nursing,
Ren Ci Hospital

Ms Rene Ang
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Communications & Service Quality,
Bright Vision Hospital (Till Jul 2017)

Ms Ong Hui Ming
Executive Director,
Econ Healthcare Group

Mr Then Kim Yuan
Administrator, Lee Ah Mooi
Old Age Home

Ms Christina Loh
Director of Nursing,
Man Fut Tong Nursing Home
(Till Jun 2017)

Mr Andy Chay
Assistant Director, Nursing,
NTUC Health Nursing Home

Ms Ca’uis Chan
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Development and Client Relations
(Residential Care), NTUC Health
Nursing Home

Ms Debbie Chow
Senior Manager, Clinical Services,
SPD

Ms Janice Lim
Manager, Business & Service
Excellence, SPRING Singapore

Ms Jocelyn Tan
Senior Manager, Community
Partnership, Service Quality and
Corporate Communications,
United Medicare Centre
(Till Apr 2017)

HEALTHCARE PRODUCTIVITY
FUND – COMMUNITY HEALTH
IMPROVEMENT AND
PRODUCTIVITY SCHEME
(HPF-CHIPS) APPROVAL PANEL

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Dr Wong Kirk Chuan
Deputy Chief Executive Officer,
Agency for Integrated Care
(Till Nov 2017)

Mr Tan Kwang Cheak
Deputy Chief Executive Officer,
Agency for Integrated Care
(From Nov 2017)

MEMBER
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Group Chief, Corporate Finance
Office, Grant Management Office,
Regional Engagement &
Integration Division

Mr Kevin Tsang
Chief Information Officer,
Agency for Integrated Care

Ms Heidi Rafman
Chief, ILTC Quality,
Innovation & Productivity,
Agency for Integrated Care

Mr Mark Ho
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Healthcare Finance Division,
Ministry of Health

Dr Kenny Tan
Chief Executive Officer,
St Luke’s Eldercare Ltd

Sister Geraldine Tan
Executive Director,
St Joseph’s Home

Mr Leon Lui
Head, Clinical
Services and Wellness
Head, Residential and Home Care,
NTUC Health (Till Jan 2018)

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Services, Quality & Risk
Management Department,
Yishun Community Hospital

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FRAMEWORK – CLINICAL
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Hua Mei Centre for Successful
Ageing, Tsao Foundation

Dr Ang Yan Hoon
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Geriatric Medicine,
Khoo Teck Puat Hospital

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Ren Ci Hospital

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Khoo Teck Puat Hospital

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Home Nursing Foundation

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Mr Abhimanyau Pal
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Consultant, St Luke’s Hospital

Ms Yip Moh Han
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Singapore Christian Home

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National Healthcare Group

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Frontier Healthcare Group

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Agency for Integrated Care
(Till Nov 2017)

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Mission Medical Clinic

Dr Lee Yik Voon
Family Physician, Lee and
Tan Family Clinic and Surgery

Dr Tan Tze Lee
Senior Physician,
The Edinburgh Clinic

Dr Tammy Chan
Family Physician, TC Family Clinic

Dr Theresa Yap
Family Physician,
Yang & Yap Clinic & Surgery

Dr Wong See Hong
Family Physician,
Fullerton Healthcare (Pasir Panjang)

Dr Chua Teo Ngee
Senior Physician,
Chua Medical Centre

Dr Wilson Eu
Family Physician,
Sennett Medical Clinic

Dr Kwong Kum Hoong
Family Physician,
Princeton Family Clinic

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Medical Director,
Hua Mei Mobile Clinic

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Consultant, Primary and Community
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Senior Physician, Mei Ling Clinic

Dr Sorinder Singh
Family Physician, Drs Singh
& Partners, Raffles City Medical
Centre, Drs Singh & Partners,
Woodlands

Dr Jason Yap
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Shenton Medical Group

Dr Ho Han Kwee
Director, Primary Care
Partnerships, Regional Health
System Planning Office,
National University Health System

RESEARCH AND
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Principal Consultant and
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Agency for Integrated Care

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Senior Consultant Geriatrician &
Director, Community Geriatrics,
Changi General Hospital

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University of Singapore (NUS) &
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Vice Dean (Research) / Dean
(from Jan 2018), Saw Swee Hock
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Saw Swee Hock School of
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Dr Lina Ma
Group Vice President (Clinical /
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Holdings Pte Ltd

Dr Lim Wei-Yen
Acting Director, Research &
Development Office,
Agency for Integrated Care

SCIENTIFIC COMMITTEE OF
THE GLOBAL CONFERENCE
ON INTEGRATED CARE

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A/Prof Chin Jing Jih
Divisional Chairman, Integrated
and Community Care and Senior
Consultant Geriatrician,
Tan Tock Seng Hospital

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Principal Consultant and
Chief Care Transition Office,
Agency for Integrated Care

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Director, Office of Integrated Care
Senior Consultant, Family Medicine
and Continuing Care, Singapore
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Dr Lim Wei-Yen
Acting Director, Research
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System / University Health Network,
Toronto, Canada

Dr Wong Sweet Fun
Clinical Director for Population
Health, Innovation and Analytics,
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Prof Teo Yik Ying
Vice Dean (Research) / Dean
(From Jan 2018), Saw Swee Hock
School of Public Health, National
University of Singapore

SHARED PROCUREMENT
SERVICES COMMITTEE

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Ms Heidi Rafman
Chief, ILTC Quality, Innovation
& Productivity Division,
Agency for Integrated Care

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Executive Director, The Salvation
Army, Peacehaven Nursing Home

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St Theresa’s Home

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Senior Manager, Sree Narayana
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Ms June Lim
Senior Manager,
Institute of Mental Health

Ms Lee Kah Yan
Senior Procurement Executive,
Bright Vision Hospital (Till Feb 2017)

Dr Lina Ma
Deputy Executive Director,
Lions Home for the Elders
(Till Mar 2017)

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

SHARED PROCUREMENT
SERVICES EVALUATION PANEL

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

MEMBER
Mr Dennis Tong
Operation Manager,
Bright Hill Evergreen Home
(Till Jun 2017)

Mr Edwin Yeo
Executive Director,
XiSer CareServe

Mr Hudson Teh
Senior Finance Manager, Ling
Kwang Home for Senior Citizens

Ms Christina Loh
Director of Nursing,
Man Fut Tong Nursing Home
(Till Jun 2017)

Ms Jenny Sim
Group Director Nursing,
Ren Ci Hospital

Ms Winnie Koh
Chief Executive Officer,
Moral Home for the Aged
Sick Limited

Sister Gillian Beins
Senior Nurse Manager,
St Joseph’s Home

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

CHAIRPERSON
Mr Chua Song Khim
Chief Executive Officer, NTUC
Health Co-operative Ltd
Deputy Chief Executive, National
University Health System

DEPUTY CHAIRPERSON
A/Prof Lee Kheng Hock
Medical Director,
Bright Vision Hospital

MEMBER
A/Prof Tan Boon Yeow
Chief Executive Officer, Senior
Consultant, St Luke’s Hospital

Ms Cheong Choy Fong
Director, Quality and
Risk Management,
Khoo Teck Puat Hospital

A/Prof Ong Biauwei Chi
Chairman, Medical Board,
Sengkang Health Singapore
Senior Consultant, Department
of Anaesthesiology, Singapore
General Hospital

Dr Chow Mun Hong
Director, Quality Management,
SingHealth Polyclinics

Mr Sairam Azad
Assistant Director, Health &
Senior Care, AWWA Ltd

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

Ms Chin Soh Mun
Director of Nursing,
Dover Park Hospice

Ms Jenny Sim Teck Meh
Group Director Nursing,
Ren Ci Hospital

A/Prof Sophia Ang Bee Leng
Senior Consultant, Anaesthesia,
Vice Chairman Medical Board
for Patient Safety and Quality,
National University Hospital

Ms Heidi Rafman
Chief, ILTC Quality, Innovation
& Productivity Division,
Agency for Integrated Care



Home & Community Care Division

Home and Community Care Division synergises developments in community-based and home care services, including spearheading new models of care and services. It also develops palliative care services in the Community to support our clients to live well till the end.

Primary Care Division

The Division plans and implements primary healthcare initiatives in the Community Care sector. It engages the private General Practitioners to participate in various national initiatives to provide holistic care for seniors in the community, near their homes.

Senior Support & Carer Services Development Division

The Division oversees the planning and development of support services for seniors and their caregivers, that enable seniors to age in the community. SCD also administers financial assistance schemes to help families defray the cost of caring for their frail seniors at home.

Care Transition Division

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 Mental Health Division

The 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 clients and their family members.

Community Networks for Seniors Division

Community Networks for Seniors Division enables seniors to age in place through three key thrusts - keeping well seniors active and healthy, supporting seniors living alone with befriending, and getting help to frail seniors quickly. Working closely with government agencies and various community partners, the division aims to improve social-health integration and last mile delivery for seniors.

Residential Care Office

The Residential Care Office works with Community Care partners to ensure operational readiness of new residential facilities. It also drives AIC's efforts in exploring new models of residential care in the Community Care sector.

Regional Engagement & Integration Division

The Division plays a critical role in AIC's outreach and engagement efforts with providers. It provides holistic support to the development of the six Regional Health Systems, connecting care services within the different regions of Singapore to better integrate care for clients.

ILTC Manpower Development & Resourcing Division

The ILTC Manpower Development & Resourcing Division aims to develop a pipeline of workforce and build a stronger local core to support the growth of the Community Care sector. The division aims to raise the competency level of the workforce with career development opportunities and training pathways through scholarships, awards, professional and traineeship programmes.

ILTC Quality, Innovation & Productivity Division

The ILTC Quality, Innovation and Productivity Division drives efforts to improve and uphold the quality of care and to promote a culture of continuous quality and productivity improvement in the Community Care sector. The Division builds sectoral capability in Quality Improvement and advances the quality of Community Care through partnering care providers in various initiatives e.g. process improvement and re-design for productivity, service quality, psychosocial wellness, meeting enhanced quality standards, and benchmarking for improvement. We also support the sector in emergency preparedness, shared procurement and the administration of the Healthcare Productivity Fund.

ILTC IT Enablement Office

The ILTC IT Enablement Office manages the development and implementation of IT systems in the Community Care sector. It enables nursing homes, home and centre-based service partners to adopt IT to enhance their operational effectiveness, contributing to better care for clients.

Grant Management Office

The Grant Management Office administers the Tote Board Community Healthcare Fund and Community Silver Trust which support the Community Care sector. It oversees and implements AIC's policies and processes for grant management and disbursements.

Corporate Finance Office

The Corporate Finance Office aims to add value across AIC. The division works with AIC and divisions to ensure financial prudence and governance in AIC, equip divisions with the capability to adhere to AIC procurement principles, and enable divisions to access financial information to make informed decisions.

Research and Development Office

The Research & Development Office supports AIC and the Community Care sector in the areas of health services and applied research, and capability building in programme evaluation.

Corporate Services 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 and Office Administration.

Human Resource Division

Human Resource Division seeks to position AIC as an employer of choice with progressive People Excellence practices and programmes. The Division supports AIC in its rewards and recognition policies, plays the role of business partner for Divisions, and partners AIC employees in talent and career development so that AIC can build up a future-ready workforce.

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.

BOARD OF DIRECTORS

1. Mr Chua Chin Kiat
Board Member

2. Dr Jennifer Lee
Chairman

3. Dr Gerard Ee
Deputy Chairman

4. Ms Maznah Masop
Senior Assistant Director,
Development Office,
Nanyang Technological University

5. Mr Jeyaraj Indra Raj
Partner, Harold Seet & Indra Raj

6. Mr William Liu
Chairman & Managing Partner,
Stream Global Pte Ltd

7. Ms Teoh Zsin Woon
Deputy Secretary (Development),
Ministry of Health

8. Dr Ang Seng Bin
Head of Menopause Unit, Head
of Family Medicine Service,
Consultant Family Physician,
KK Women's & Children's Hospital

9. Ms Tan Hwee Bin
Executive Director,
Wing Tai Holdings Limited

10. Ms Theresa Goh
Managing Partner,
ThreeSixty Partnership

11. Mr Daniel Soh
Board Member

12. Associate Professor
Chin Jing Jih
Deputy Chairman,
Medical Board & Divisional
Chairman, Integrative and
Community Care,
Tan Tock Seng Hospital



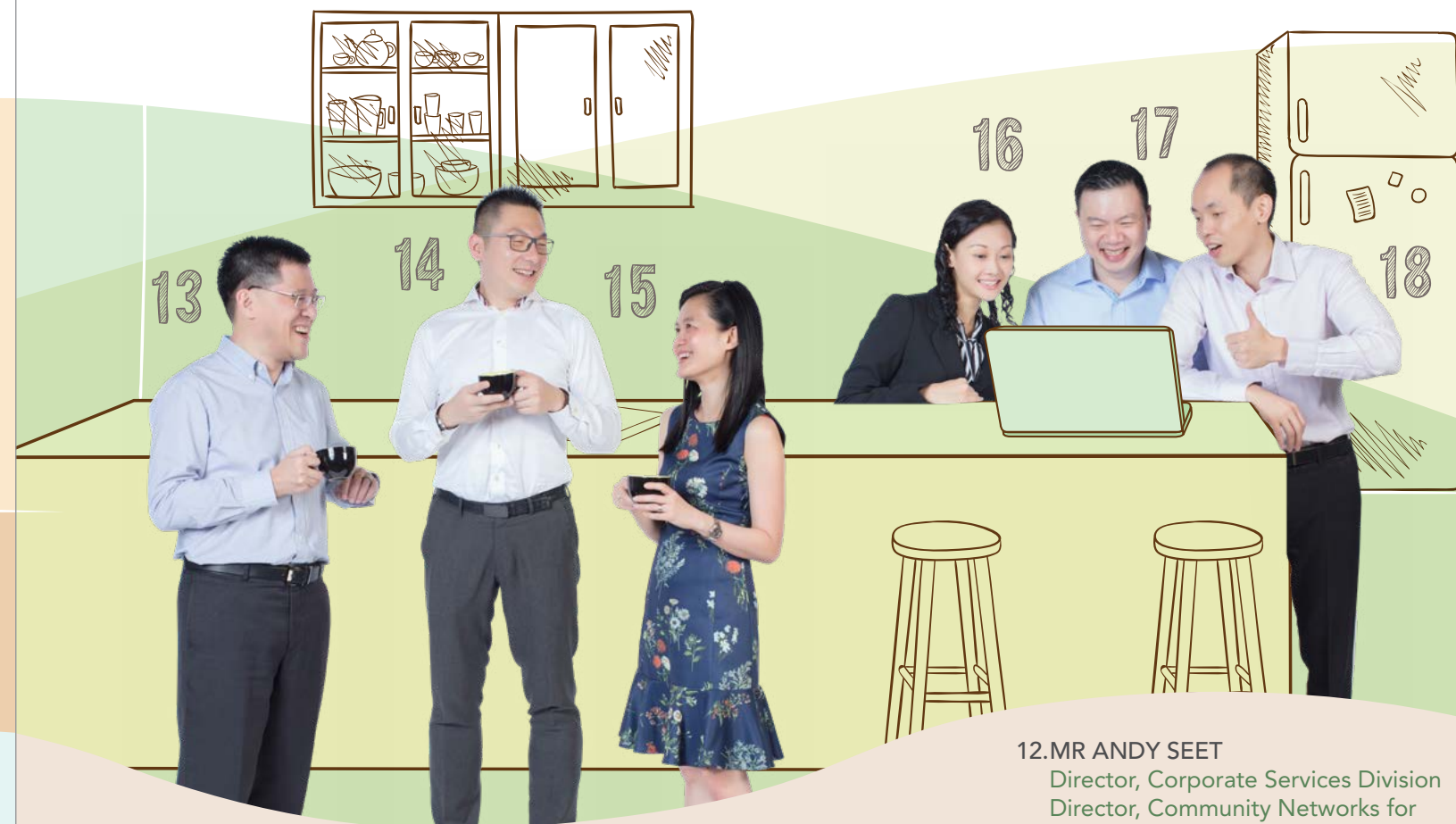
SENIOR MANAGEMENT



1. MS CAROL CHOI
Director, Corporate Finance Office
2. MS IVY LOK
Deputy Director,
Care Transition Division
3. DR JASON CHEAH
Chief Executive Officer
4. MR CHERN SIANG JYE
Group Chief, Corporate
Finance Office, Grant Management
Office, Regional Engagement
& Integration Division
5. MS VIOLET NG
Deputy Director,
Residential Care Office
6. MS KAREN LEE
Director, Home &
Community Care Division

7. DR WONG LOONG MUN
Principal Consultant
Chief, Care Transition Division
Chief, Community Networks for
Seniors Division
8. MS TEO SIO HOON
Chief, ILTC Manpower
Development & Resourcing Division
9. MR TAN KWANG CHEAK
Deputy Chief Executive Officer
10. DR KOK MUN FOONG
Group Chief, Home First Group
Chief, Home & Community Care Division
Chief, Primary Care Division
Chief, Research & Development Office
11. MS SEE YEN THENG
Director, Regional Engagement
& Integration Division

12. MR ANDY SEET
Director, Corporate Services Division
Director, Community Networks for
Seniors Division
13. MR KEVIN TSANG
Chief Information Officer
14. MR LOUIS CHUI
Deputy Director,
ILTC Manpower Development
& Resourcing Division
15. MS REBECCA CHONG
Deputy Director,
Community Mental Health Division
16. MS KOH PUAY LING
Deputy Director,
Senior Support & Carer
Services Development Division
17. MR HAGEN ONG
Deputy Chief,
Human Resource Division
18. MR ONG YUNN SHING
Chief, Corporate Services Division
Chief, Residential Care Office





19. MR KELVIN LIM
Chief, Senior Support & Carer
Services Development Division

20. MS LOK YOKE HAR
Deputy Director,
ILTC IT Enablement Office

21. MR SEAN TAN
Deputy Director, Regional
Engagement & Integration Division

22. MS HEIDI RAFMAN
Deputy Chief, ILTC Quality,
Innovation & Productivity Division

23. MS CHUA MUI LEE
Deputy Director,
Human Resource Division

24. MS LYNDA SOONG
Chief, ILTC IT Enablement Office

25. MS LINDA CHEW
Deputy Director,
Corporate Finance Office

26. MR LIM SOON HUA
Deputy Director,
Corporate Services Division

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Deputy Director, Information
Technology Division

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Director, Home &
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29. MS YEO LI LI
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30. MS ANGELINE THIA
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31. DR TAN WENG MOOI
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