

# 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.



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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.



## 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.



- 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.

## 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.



## AUGUST

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



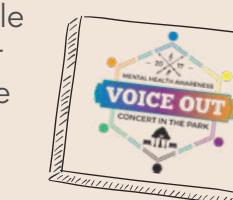
## NOVEMBER

- 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.



## 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.

Diabetes runs in my family. I was diagnosed with it at 32. My mother's diabetes led to kidney failure and it was pretty rough in the year before she passed.

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.

“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

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.

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



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

“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

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



## 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



**M**y 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.

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.

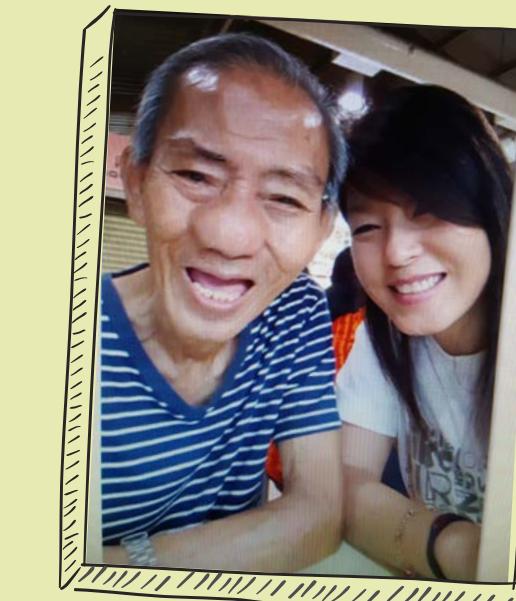
Later, I found out that our Facebook post was shared on the Dementia-Friendly Singapore Facebook page. That was where the kind-



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.



Mr Yee and his daughter,  
Ms Anna Yee.



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

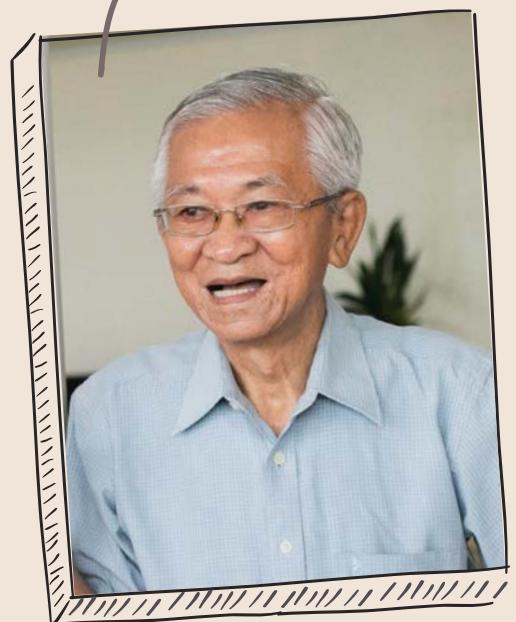
I feel more comforted knowing that there are people around my dad to help him, so that he can stay at home as he wishes. He can still enjoy the things he loves, and that's most important for me.

- Ms Anna Yee

## 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.

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.



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

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

“ 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



I can now walk slowly with support, and can even go for short strolls near my home. This is a big difference from one and half years ago, so I'm very happy.

I always had a weak spine. But I could still do everything – washing, cooking, looking after my grandchildren. One day in mid-2016, I fell in the shower and injured my spine and the surrounding nerves.

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.

**MR CHUA**

## APPRECIATING THE OUTDOORS, AGAIN

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.

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

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.



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

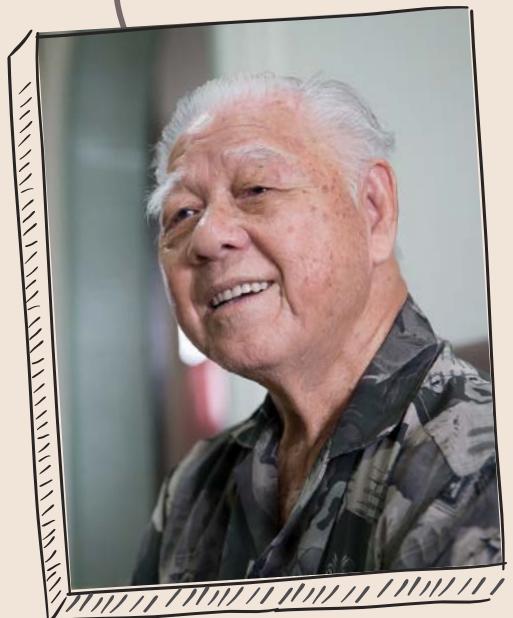


- DOREEN ANG  
OCCUPATIONAL THERAPIST

### 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.

MR LIM



## GETTING CARE AT HOME AND IN THE COMMUNITY

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.

After I retired at 62, I got to spend more time with my wife. It was just us at home since our daughter got married and moved out more than 15 years ago. Every morning, we'd head out for breakfast and do grocery shopping. Then we'd come home for lunch. We enjoyed staying home and watching TV programmes.



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

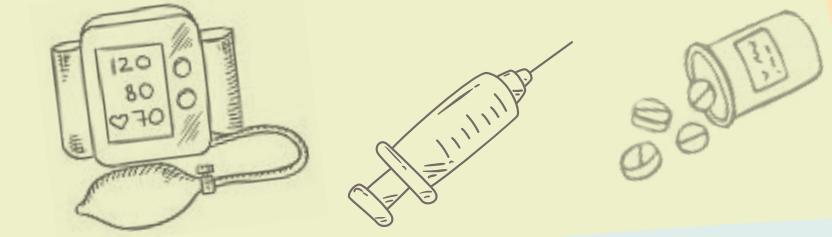
glad that she is around. If my condition gets out of control, I would get weak and possibly fall. That would be a big problem.

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



- 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 Tahirram Daswani found an alternative care option for himself when his foreign domestic worker went on a two-week break.

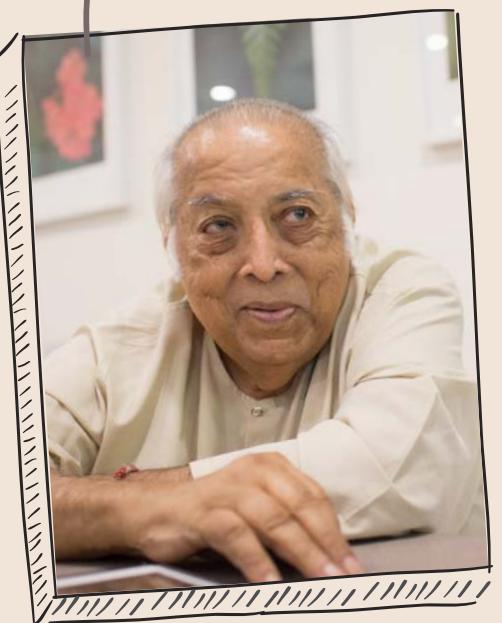
As I grow older, I started to experience health problems. Sitting in front of the computer most of the time caused me to put on weight. My legs get swollen often due to the lack of exercise, so my mobility is limited. To help with my daily needs, my eldest son, who I live with, has hired a helper to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

I retired after a stroke in 1990 and have been devoting my time to community work for the Sindhi community. It's been my "full-time" job for the last 15 years. I've got a lot of time and since I prefer to stay at home, I plan annual events and conventions for a global Sindhi association to bring our community together. I do this all from my computer.

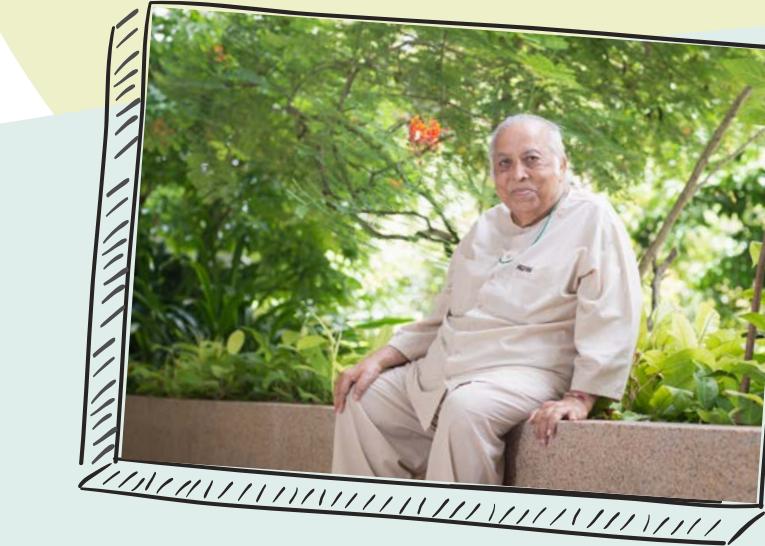
When my current helper went for her two-week leave, my son was concerned about how I could cope. She's been my capable assistant for the past two years. After discussing, we

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



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



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 Tahirram 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



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.

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.

- Mdm Foong Siew Toh

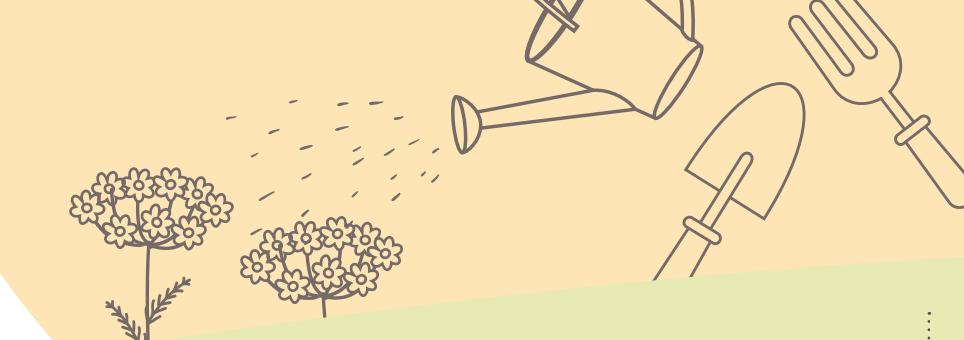
## A HOME AWAY FROM HOME

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.



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.



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.

## 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.

## 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.

## 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

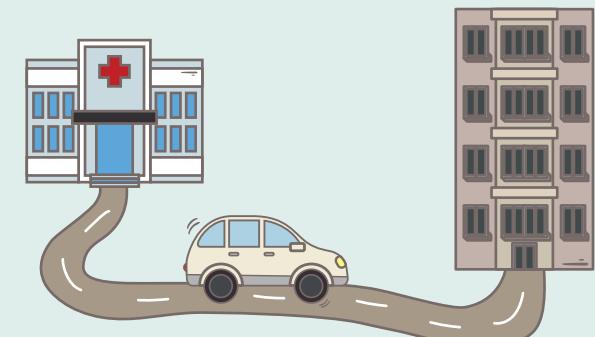
Case managers coordinate relevant social and healthcare needs in the community for frail seniors who find it difficult to manage their various conditions. This helps them to cut down on unneeded hospital visits. **Over 250 seniors** have been supported as of 2017.

## 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

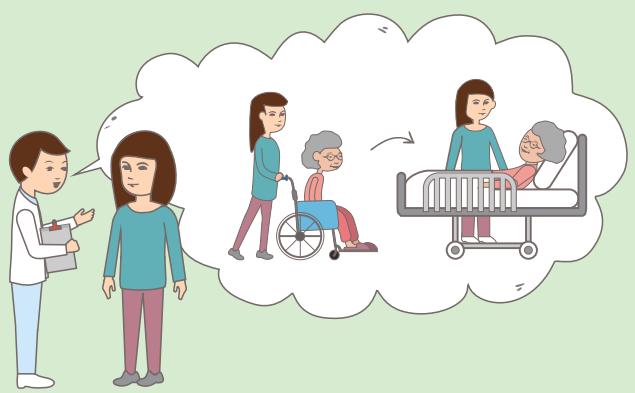
Staff at the booths engage polyclinic-goers on eldercare services and schemes that can benefit them. **Over 9,000 people** have been engaged as of 2017.

## 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.



## 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.**

## 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.**

## 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

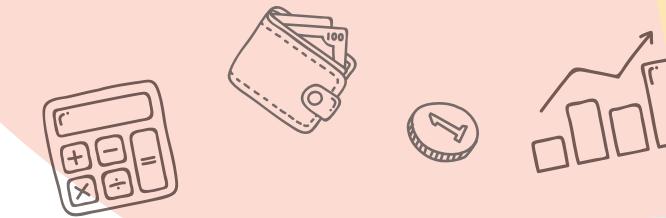


The scheme provides subsidies for assistive devices such as wheelchair and walking sticks, home healthcare items such as diapers and milk supplements, and transport to approved eldercare and dialysis centres. In 2017, **over 19,000 seniors benefitted from SMF.**

## Community Health Assist Scheme (CHAS)

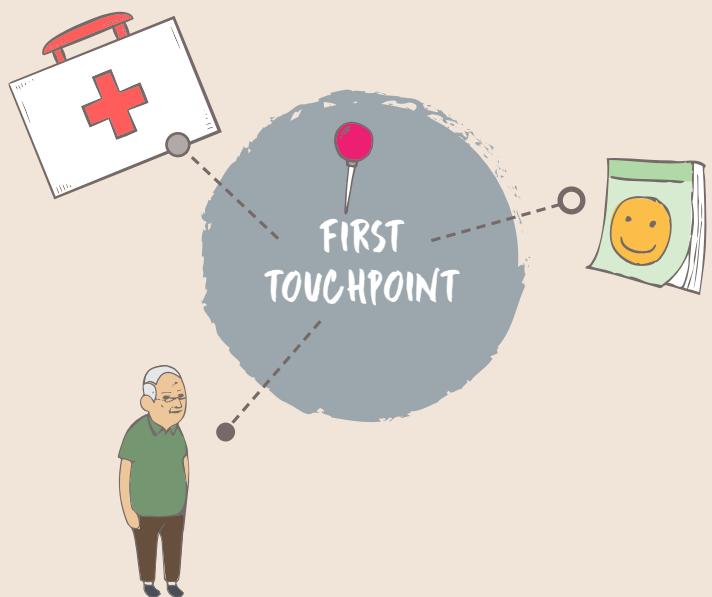


This scheme enables Singapore Citizens from lower- to middle-income households and Pioneers to receive subsidies for medical and dental care at participating General Practitioners and dental clinics. In 2017, **about 1.3 million Singaporeans have benefitted from the scheme.**



# 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.

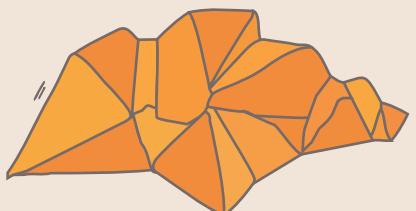


## First Touchpoint

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

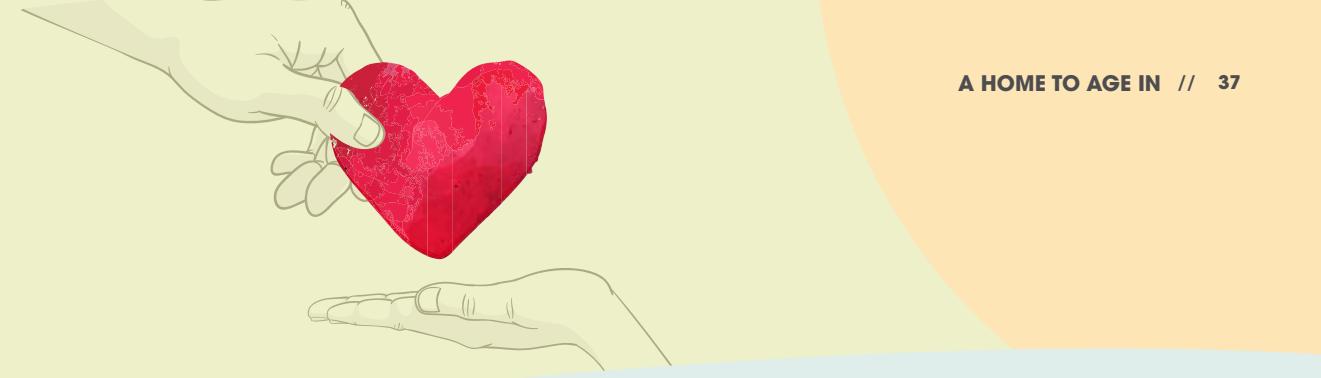
These teams, through their outreach, raise awareness of dementia and mental health conditions, identify those at risk early, link them up to appropriate services provide them and their caregivers with basic emotional support and preventive care activities. As of 2017, 33 teams have **reached out to over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

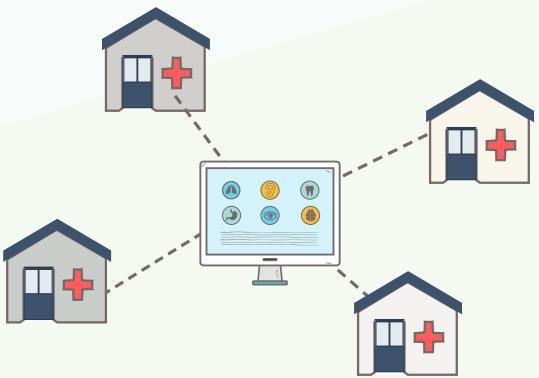
The Model Caregiver Awards on 25 March 2017 received **over 60 caregiver nominations** from close to 20 agencies in the community and social care sector. The event celebrated caregivers for their efforts in caring for their loved ones at home. Spearheaded by AWWA, we were one of the supporters with the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

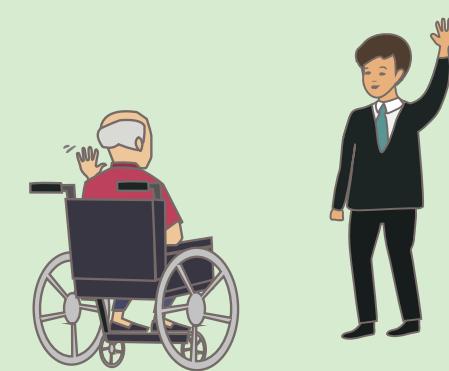
To develop the next generation of community care leaders, we also organise **INSIGHT and IMPACT Leadership Programmes** for management-level staff to hone their leadership skills. In 2017, over 80 participants attended the two programmes.

## 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.



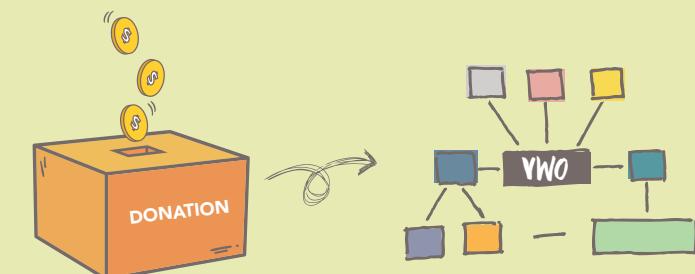
### Healthcare Productivity Fund

**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.

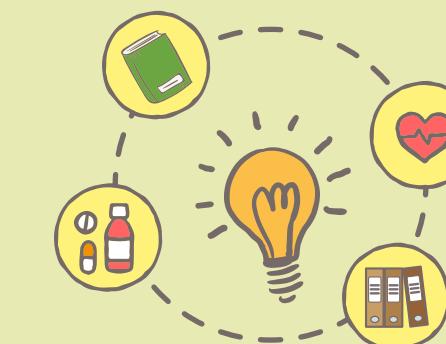


### Community Silver Trust



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

### CHAIRMAN

#### Prof Pang Weng Sun

Deputy Group Chief Executive Officer (Population Health), National Healthcare Group

### VICE-CHAIRPERSON

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Senior Consultant, St Andrew's Community Hospital

### MEMBER

#### Dr Raymond Ng Han Lip

Consultant, Tan Tock Seng Hospital

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### Dr Dennis Seow Chuen Chai

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### Adj Asst Prof Sim

#### Kheng Leng David

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### A/Prof Cynthia Goh

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### Dr Hong Wei Wei

Assistant Director, Hospital Services Division, Ministry of Health

### Mr Tan Kim Kwang

Group Human Resource Director, Ezion Holdings Limited

### Dr Kok Mun Foong

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

## AIC FACILITY MEDIFUND COMMITTEE

### CHAIRPERSON

#### Dr Loh Yik Hin

Chief Executive Officer, St Andrew's Community Hospital

### MEMBER

#### Mrs Wee Wan Joo

Board Member, St Luke's Hospital 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

Director of Nursing (Retired), KK Women's and Children's Hospital

### Mr Tan Kim Kwang

Group Human Resource Director, Ezion Holdings Limited

## COMMUNITY CARE MANPOWER COMMITTEE

### CHAIRMAN

#### Ms Loh Shu Ching

Chief Executive Officer, Ren Ci Hospital

### CO-CHAIRMAN

#### Mr Tim Oei

Chief Executive Officer, National Kidney Foundation

### LEAD, WORKFORCE INNOVATION TASK FORCE

#### Dr Ow Chee Chung

Chief Executive Officer, Kwong Wai Shiu Hospital

### LEAD, SKILLS STANDARD TASK FORCE

#### Dr Kenny Tan

Chief Executive Officer, St Luke's ElderCare Ltd

### MEMBER

#### Mr Jason Foo

Chief Executive Officer, Alzheimer's Disease Association

### Ms Tan Li Li

Executive Director, Singapore Association for Mental Health

### Ms Teo Sio Hoon

Chief, ILTC Manpower Development & Resourcing Division, Agency for Integrated Care

### Ms Christina Loh

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

### Mr Bart Lim

Deputy Executive Director, St Joseph's Home

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### SKILLS STANDARDS TASKFORCE LEAD

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### Ms Susan Gui

Director of Nursing, Villa Francis Home for the Aged

### Ms Fong Yoke Hiong

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### WORKFORCE INNOVATION TASKFORCE LEAD

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### Ms Tan Li Li

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### Ms Ling Bee Sian

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### Ms Ng Lay Ling

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## COMMUNITY CARE MANPOWER DEVELOPMENT AWARD

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Agency for Integrated Care

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National University Health System

**Ms Ng Gaik Nai**  
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**Ms Phua Puay Li**  
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Yishun Community Hospital

### Dr Chua Chi Siong

Medical Director,  
Jurong Community Hospital

### Ms Florence Cheong

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### Ms Jenny Sim

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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

Senior Manager, Partnership  
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

### CHAIRPERSON

#### 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

#### Mr Chern Siang Jye

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

Deputy Director (Subvention),  
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 Luai

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

### Ms Florence Chng

Assistant Director, Clinical  
Services, Quality & Risk  
Management Department,  
Yishun Community Hospital

## INDEPENDENT CARE ASSESSMENT FRAMEWORK - CLINICAL ADVISORY PANEL

### CHAIRPERSON

#### A/Prof Koh Choon Huat, Gerald

Leader of Health Systems and  
Behavioural Sciences (HSBS)  
Domain, Saw Swee Hock School  
of Public Health

### MEMBER

#### A/Prof Leong Yi Onn, Ian

Senior Consultant, Geriatric  
Medicine, Tan Tock Seng Hospital

### Dr Ng Wai Chong

Chief, Clinical Affairs,  
Hua Mei Centre for Successful  
Ageing, Tsao Foundation

### Dr Ang Yan Hoon

Senior Consultant,  
Geriatric Medicine,  
Khoo Teck Puat Hospital

## MEDICAL ADVISORY BOARD

### CHAIRPERSON

#### Dr Lee Liang Tee

Clinical Director,  
Ren Ci Hospital

### MEMBER

#### Dr Ang Yan Hoon

Senior Consultant,  
Geriatric Medicine,  
Khoo Teck Puat Hospital

### Ms Chan Mei Mei

Director of Nursing,  
Home Nursing Foundation

### Dr Ee Chye Hua

Consultant Geriatrician,  
ECH Consultancy

### Dr Kelvin Ng

Consultant, Community Psychiatry,  
Institute of Mental Health

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Senior Consultant,  
Rehabilitation Medicine,  
Singapore General Hospital

**Mr Abhimanyau Pal**

Executive Director, SPD

**Dr Siew Chee Weng**

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Yishun Community Hospital

**A/Prof Tan Boon Yeow**

Chief Executive Officer, Senior  
Consultant, St Luke's Hospital

**Ms Yip Moh Han**

Executive Director,  
Singapore Christian Home

**NATIONAL GENERAL  
PRACTITIONERS  
ADVISORY PANEL****CHAIR****Prof Chee Yam Cheng**

President, NHG College,  
National Healthcare Group

**CO-CHAIR****Dr Tham Tat Yean**

Chief Executive Officer,  
Frontier Healthcare Group

**MEMBER****Dr Wong Kirk Chuan**

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

**Dr Chng Shih Kiat**

Medical Director,  
Raffles Medical Group

**Dr Leong Choon Kit**

Family Physician,  
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

**Dr Ng Wai Chong**

Medical Director,  
Hua Mei Mobile Clinic

**Dr Adrian Ee**

Chief Executive Officer,  
SingHealth Polyclinics

**A/Prof Chong Phui-Nah**

Chief Executive Officer, National  
Healthcare Group Polyclinics /  
Consultant, Primary and Community  
Care Division, Health Services Group

**Dr Elaine Tan**

Director, Primary & Community  
Care Division, Ministry of Health

**Dr Pauline Neow May Yin**

Senior Physician, Mei Ling Clinic

**Dr Sorinder Singh**

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

**Dr Jason Yap**

Family Physician,  
Shenton Medical Group

**Dr Ho Han Kwee**

Director, Primary Care  
Partnerships, Regional Health  
System Planning Office,  
National University Health System

**RESEARCH AND  
INNOVATION COMMITTEE****CO-CHAIR****A/Prof Tan Boon Yeow**

Chief Executive Officer, Senior  
Consultant, St Luke's Hospital

**Dr Wong Loong Mun**

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

**MEMBER****Dr Christopher Lien**

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

**Dr Wong Chek Hooi**

Senior Consultant,  
Khoo Teck Puat Hospital  
Adjunct Asst Professor, Yong Loo  
Lin School of Medicine, National  
University of Singapore (NUS) &  
Department of Medicine, Duke-NUS

**Prof Teo Yik Ying**

Vice Dean (Research) / Dean  
(from Jan 2018), Saw Swee Hock  
School of Public Health,  
National University of Singapore

**A/Prof Joanne Yoong**

Director, Centre for Health Services  
and Policy Research,  
Saw Swee Hock School of  
Public Health, National  
University of Singapore

**Dr Ng Wai Chong**

Chief, Clinical Affairs,  
Hua Mei Centre for Successful  
Ageing, Tsao Foundation

**Dr Lina Ma**

Group Vice President (Clinical /  
Aged Care), Allium Healthcare  
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****CO-CHAIR****A/Prof Chin Jing Jih**

Divisional Chairman, Integrated  
and Community Care and Senior  
Consultant Geriatrician,  
Tan Tock Seng Hospital

**Dr Wong Loong Mun**

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

**MEMBER****Dr Christopher Lien**

Senior Consultant Geriatrician &  
Director Community Geriatrics,  
Changi General Hospital

**A/Prof Josip Car**

Director of Centre for Population  
Health Sciences, Lee Kong Chian  
School of Medicine, Nanyang  
Technological University

**A/Prof Lee Kheng Hock**

Director, Office of Integrated Care  
Senior Consultant, Family Medicine  
and Continuing Care, Singapore  
General Hospital

**Dr Lim Wei-Yen**

Acting Director, Research  
and Development Office,  
Agency for Integrated Care

**Dr Samir Sinha**

Director of Geriatrics, Sinai Health  
System / University Health Network,  
Toronto, Canada

**Dr Wong Sweet Fun**

Clinical Director for Population  
Health, Innovation and Analytics,  
Yishun Health

**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****CHAIRPERSON****Ms Heidi Rafman**

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

**DEPUTY CHAIRPERSON****Mdm Low Mui Lang**

Executive Director, The Salvation  
Army, Peacehaven Nursing Home

**MEMBER****Brother Thomas Chia**

Assistant Director of Nursing,  
St Theresa's Home

**Mr Kim Yap**

Senior Manager, Sree Narayana  
Mission (Singapore)

**Mr Tan Kok Hwa**

Assistant Director, IT & Support  
Services, Kwong Wai Shiu Hospital

**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

**CHAIRPERSON**  
**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 Biauw 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

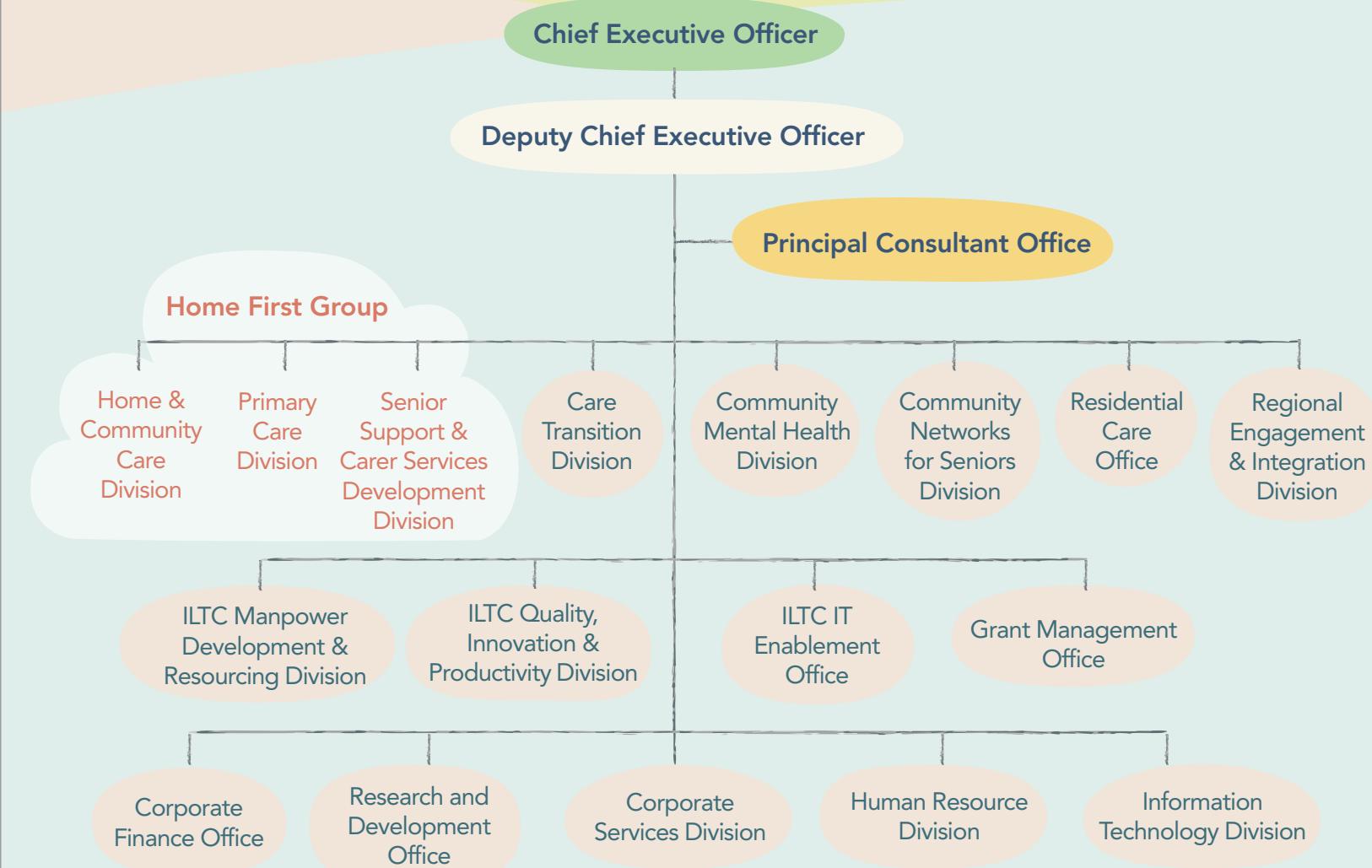
**Ms Chin Soh Mun**  
Director of Nursing,  
Dover Park Hospice

**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

# OUR ORGANISATION



### Principal Consultant Office

The Principal Consultant Office supports initiatives to provide coordinated systems of care and develop new care models. These initiatives involve multi-faceted collaborations within the organisation, across ministries and agencies within the Government, hospitals, Voluntary Welfare Organisations, Grassroots Organisations and community partners.

### Home First Group

The Home First Group comprises the Home & Community Care Division, Primary Care Division and the Senior Support & Carer Services Development Division. This Group synergises efforts in ensuring the availability of Community Care options, advocating planned life-changing decisions, and supporting clients and caregivers to age well at home and in the community.

**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

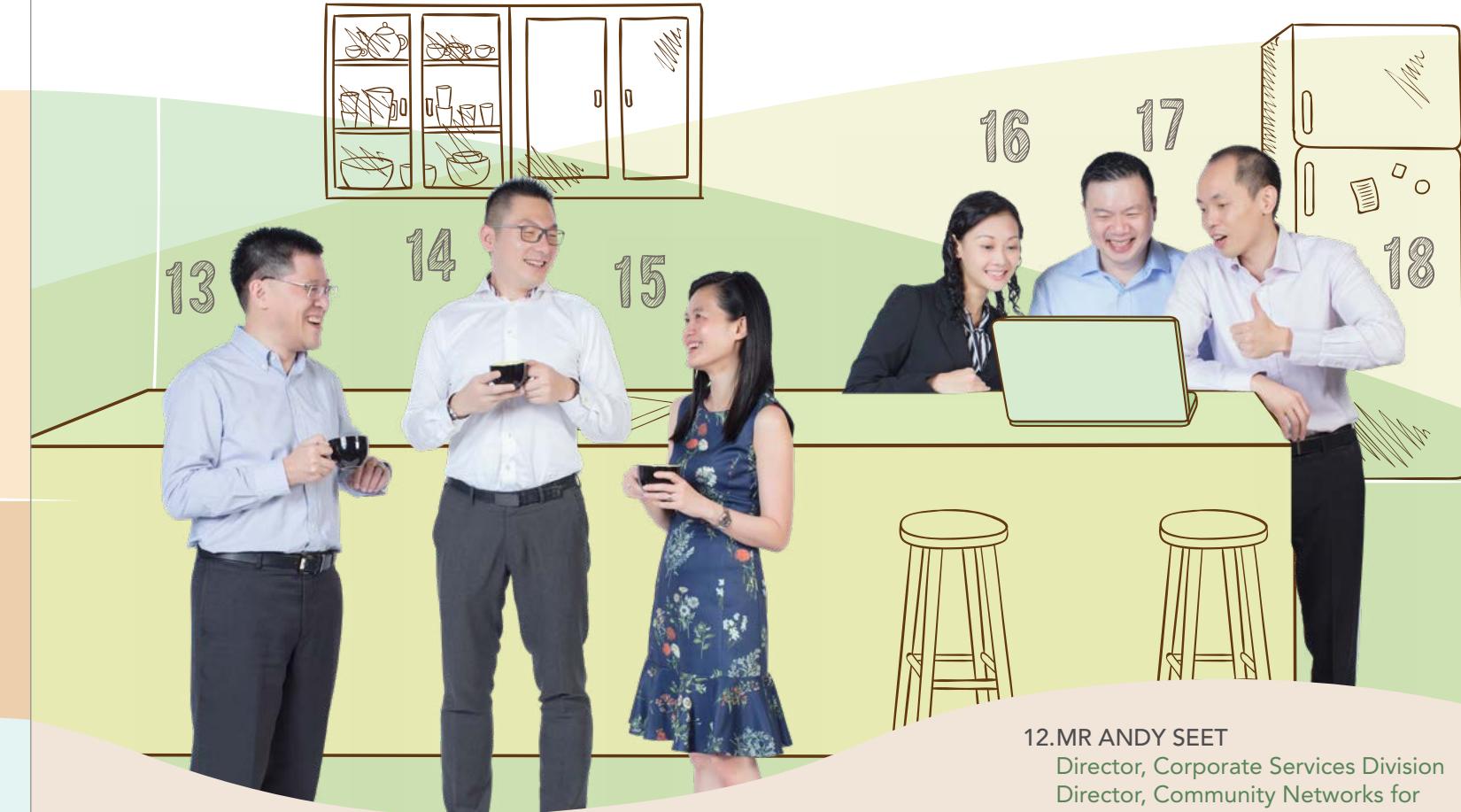
10. Ms Theresa Goh  
Managing Partner,  
ThreeSixty Partnership

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

27.MR DAVID WONG  
Deputy Director, Information Technology Division

28.MS WINIFRED LAU  
Director, Home & Primary Care Division

29.MS YEO LI LI  
Deputy Director, Grant Management Office

30.MS ANGELINE THIA  
Deputy Director, Regional Engagement & Integration Division

31.DR TAN WENG MOOI  
Chief, Community Mental Health Division

32. MR BENNY YIP  
Deputy Director, Senior Support & Carer Services Development Division

33.MS PEGGY LEE  
Deputy Director, Community Mental Health Division

34.MS CAROL LEOW  
Deputy Director, ILTC Manpower Development & Resourcing Division

35.MS LAI PHUI CHING  
Deputy Director, Home & Community Care Division

36.MR ERIC TOO  
Head, Corporate Development and Office Administration

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