

DOVER PARK HOSPICE

30
YEARS
MAKING MORE MOMENTS MATTER



OVER
360
MONTHS

Providing quality holistic
palliative care for patients
and their families

Insighting Care



Inpatient Care

Palliative care goes beyond caring for a patient's physical needs. It encompasses a holistic approach in caring for their physical, emotional, psychosocial and spiritual wellbeing. Through our multidisciplinary team of doctors, nurses, medical social workers, physiotherapists, occupational therapists, speech therapists, art and music therapists, pastoral counsellor as well as pharmacists, they come together to provide individualised care plans for our patients.

Patients with advanced illnesses tend to experience symptoms such as pain and breathlessness as their conditions deteriorate. As most caregivers do not have the knowledge or skills to help their loved ones ease such symptoms at home, inpatient care provides an option to ensure their loved ones receive the right care needed at the right time, providing respite care for caregivers at the same time.

WHO WE SERVE

- Patients with advanced, life-limiting illnesses or end-stage organ failure with a prognosis of less than 3 months
- Patients who are not being able to be cared for at home due to symptoms or nursing needs

FACILITIES

- Garden and Koi Pond
- Multi-Purpose Rooms
- Quiet room (for reflection, meditation or prayer)
- Patricia Lam Cheng Kam Music Room (used for therapy sessions, events and functions, includes a library corner as well)
- Seating areas
- Vending machines



ACTIVITIES

- Birthday and festive celebrations
- Hair-cutting and massage services by volunteers
- Happy Hour
- Legacy Work
- Lim Kopi
- Namaste Care
- Outings
- Pet-assisted activities
- Piano music playing by volunteers
- Rehabilitation activities
- Volunteers' befriending

REFERRAL AND PRE-ADMISSION

All our admissions are on a referral basis. Referrals can be initiated by any medical doctor who is caring for the patient namely from restructured hospitals, community hospitals and some home care services. After receiving the referrals and deeming the admission appropriate, we will liaise with the hospital on bed availability and patient transfer. Before the transfer, a family member will be notified to accompany the patient and help with the registration. During this time, we will also do a pre-admission counselling.

ADMISSION

Upon arrival at Dover Park Hospice, the patient will be settled into the bed and assessed by our nurses and the admitting doctor. Our team will meet with the family to fully understand the needs and concerns of the patient and the family.

FEES AND CHARGES

Daily charge per day is \$350 before GST and subsidies – fees are charged on a sliding scale based on income and after MediShield subsidies, vary from \$17 to \$350 that covers:

- Lodging and meals
- Medical and nursing care
- Therapy services
- Standard medication

Patients may use up to \$250 per day from MediSave to pay for their Inpatient stay. The MediSave funds can be from the patient's account or that of their spouse, children, parents or grandparents. The Medical Claims Authorisation Form can be obtained from our Administration Office at Level 1.

You may speak with our medical social worker to find out more about means-testing or other financial assistance schemes.





Imparting Knowledge

OVER
1560

WEEKS

**Shaping the palliative care scene
and shifting mindsets in Singapore**

Home Care

Most patients may prefer to be cared for in the comfort of their homes and in a familiar environment surrounded by their loved ones during their final moments. Started in 2011, Dover Park Home Care provides 24/7 home palliative care to patients with advanced illnesses at home including after hours on-call service.

In addition to medical and nursing care, our Home Care team also supports caregivers by equipping them with the knowledge and training so as to empower them to better care for their loved ones at home.

In line with the national focus on increasing overall community support in healthcare, Dover Park Home Care also taps on community services and resources for patients who require additional support such as physical and financial assistance. Our social work and psychosocial team also link up socially-isolated patients and their caregivers to

community partners to build a stronger network of care and support. This enables continuous social engagement and provision of much-needed respite care for full-time family caregivers.

In 2014, Programme Dignity was started to meet the needs of individuals with advanced dementia. It was a first-of-its-kind programme that specifically caters to this group of patients through its integrated home care programme.

Recognising the need of palliative care for non-cancer patients, Dover Park Hospice Home Care team collaborated with Tan Tock Seng Hospital in 2020 on Programme IMPACT (Integrated Management and Palliative Care for Terminally-ill – Non-cancer) to provide home palliative care to patients with end stage organ failure (kidney and heart) and lung diseases.

WHO WE SERVE

- Patients diagnosed with an advanced illness prognosis of less than 1 year
- Diagnosis includes cancers and non-cancers

WHAT WE PROVIDE

- A multidisciplinary team of nurses, doctors, medical social workers, Music Therapist and Art Therapist who provide physical, psychosocial and spiritual support.
- On-call service 24 hours a day, seven days a week
- Regular reviews by nurses scheduled according to patients' needs
- Visits by the doctors when medical attention is needed
- Advance Care Planning discussions
- Training of family members and caregivers to ensure patient's comfort at home
- Recommend and assist in equipment loans from vendors if needed

REFERRAL

- Referral can be made from Tan Tock Seng Hospital within designated areas in the central part of Singapore.
- All referrals can be made by doctors caring for the patients via Agency for Integrated Care portal.
- Upon acceptance of referrals, calls will be made to patients and families to explain the service and to arrange for home visits.

CHARGES

Home Care service is fully-funded excluding ad-hoc consumables which are MediSave claimable.

Day Care

People with advanced illnesses may experience social isolation as they gradually start to lose their physical mobility and spend more time at home. Through a multidisciplinary team approach comprising doctors, nurses, medical social workers, music, art and rehabilitation therapists, Dover Park Day Care aims to provide both social as well as therapy-based care to clients diagnosed with life-limiting illnesses.

Our care team regularly monitor and manage our clients' symptoms with care plans tailored to meet the goals of care of each client.

In addition, we believe that caregivers play a significant role in providing care for their loved ones at home. We place special focus in catering to the needs of caregivers while providing respite from their caregiving duties.



WHO WE SERVE

- Patients diagnosed with an advanced illness with prognosis of less than 1 year (diagnosis includes cancers and non-cancers)
- Patients with symptoms controlled and who are functionally able to tolerate transfer to Day Care
- Patients with care needs (physical, therapy or social-based) that can be met in hospice Day Care
- Patients who are able to give consent or have proxy decision makers to consent for Day Care (if patient is unable to give consent)
- R.I.S.E, a 12-week programme that empowers individuals with chronic non-cancer lung diseases to continue living meaningful lives alongside progression of their condition.

THERAPIST-LED ACTIVITIES

- Art therapy
- Music therapy
- Occupational therapy
- Physiotherapy

VOLUNTEER-LED ACTIVITIES

- Karaoke
- Board games
- Card games
- Gardening
- Art & Crafts
- Mahjong
- Weekly "Project Lim Kopi" where patients can enjoy local Kopitiam delights such as coffee, tea and toasts
- Meals and/ or tea breaks
- 2-way transport (including 1 caregiver)

REFERRAL

- Referral can be initiated by any medical doctor caring for the patient. The referring doctor has to determine if patient meets the admission criteria and designated areas in the central part of Singapore.
- Referral from restructured hospitals, community hospitals and some home care services can be made through the Agency for Integrated Care (AIC) portal.
- Referral can also be made by filling in referral form that can be downloaded from the Singapore Hospice Council website with instructions in sending us the form.
- Upon acceptance of referrals, calls will be made to patients and families to explain the service provided and transport arrangement.

CHARGES

Day Care service is fully-funded (including transport), excluding ad-hoc consumables which are MediSave claimable.



Volunteer Programme

At Dover Park Hospice, our end-of-life care goes beyond the wards. Our volunteers are a key pillar in creating a sustainable community of care to provide holistic support and comfort to our patients.

With 18 different patient and non-patient facing volunteer groups, our volunteers devote their time and talents in a variety of ways:

- Befriending
- Crafts-making and Sale of Craft
- Hairdressing
- Special Events and Celebrations
- Music Performances
- Weekly Outings
- Medical Escorts
- Massages
- Pet-Assisted Activity
- Soups, Coffee/Tea and Toasts
- Gardening
- Administrative Work
- Public Education/ Outreach

Our dedicated volunteers make it possible for Dover Park Hospice to grow in our patient-engagement efforts and initiatives. Through these activities, our volunteers play an integral part in increasing the awareness and advocate the importance of palliative care.

We welcome all who wish to volunteer and make a difference in the lives of our patients.

For more information, visit our website at <https://www.doverpark.org.sg/our-volunteers/>

Directions to Dover Park Hospice

  
@doverparkhospice

Address
10 Jalan Tan Tock Seng
Singapore 308436
(Behind National Skin Centre)

Contact details
Tel: (65) 6500 7272
Fax: (65) 6258 9007/ (65) 6254 9813
(Patient Services)
Email: info@doverpark.org.sg

Dover Park Day Care
Tel: (65) 6500 6599

Main Office:
6500 7272 (during office hours)

Nurses' Station (Level 1)
6500 7250 / 251

Nurses' Station (Level 2)
6500 7252 / 253

Nurses Station Bed 201 – 214
6500 0645

Security Counter
6500 7274 / 8764 3704

Operating Hours
Dover Park Hospice Inpatient Service (Visiting Hours)
Monday – Sunday: 11am to 8pm
(In light of COVID-19, our visiting hours are subject to change following MOH guidelines)

Dover Park Day Care
Monday – Friday: 8.30am – 5.30pm



Getting Here – By Bus
Stop along Moulmein Road
Bus Service 21 and 124

Stop along Moulmein Road, opposite National Skin Centre
Bus Service 21, 124, 518, 518A and 518B

Stop along Thomson Road, beside Novena Square
Bus Service 21, 56, 57, 131 and 166

Getting Here – By MRT
From Novena MRT Station
Bus Service 21

Getting Here – By Taxi or Car
From CTE towards TPE/SLE
Take Exit 7A towards Moulmein Road

From CTE towards City/AYE
Take Exit 7C towards Moulmein Road
Then turn left at Moulmein Road
Make a U-turn at Jalan Tan Tock Seng
Turn left at Mandalay Road

From PIE towards Changi
Take Exit 17 towards Thomson Road
Turn left into Moulmein Road after Novena MRT Station
Turn left at Mandalay Road

From PIE towards Jurong
Take Exit 15A; merge onto CTE towards City
Take Exit 7C towards Moulmein Road
Turn left at Moulmein Road
Make a U-turn at Jalan Tan Tock Seng
Turn left at Mandalay Road





DOVER PARK HOSPICE

30 YEARS

MAKING MORE MOMENTS MATTER

Key Highlights

Nursing

BACHELOR OF NURSING, CURTIN UNIVERSITY

Senior Staff Nurse, Muhammad Ikliuddin Bin Abdul Rahmat graduated from Bachelor of Nursing from Curtin University in August 2021.

COMMUNITY CARE MANPOWER DEVELOPMENT AWARDS 2021

Five of our nurses were awarded the Community Care Manpower Development Awards on 23 September 2021 to grow their career in the community care sector.

Nurse Manager Chong Yunn Ling, Nurse Manager Quek Yanting, Senior Staff Nurse Marlar Htay Aung and Senior Staff Nurse Tin Tin Mu are taking "Specialist Diploma in Palliative Care" at Ngee Ann Polytechnic and Nurse Clinician Katherine Lim is pursuing "Graduate Diploma in Community Health Nursing" at NUS.



TRAIN-THE-TRAINER PROGRAMME ON NON-INVASIVE MOBILE VENTILATION

In upskilling our clinical team, our nursing department has organised a "Train-the-Trainer programme on Non-Invasive Mobile Ventilation" for our Inpatient, Home Care nurses, doctors and physiotherapists to better care for this group of patients at home or in the hospice.

Conducted by Tan Tock Seng Hospital training department, the training was held from 19 November 2021 to 8 December 2021.

COMMUNITY CARE NURSE LEADER PROGRAMME (CCNLP)

Our Nurse Manager (Inpatient), Quek Yanting was selected for CCNLP in May 2021.

A programme by the Agency for Integrated Care, CCNLP aims to grow the next generation of nursing leaders in the community care sector.

Day Care

ROADSHOW WITH THE PALLIATIVE MEDICINE, MEDICAL ONCOLOGY TEAM AND RESPIRATORY AND CRITICAL CARE MEDICINE (RCCM) TEAM FROM TAN TOCK SENG HOSPITAL

The COVID-19 situation has brought about the closure of our Day Care on a few occasions due to the surge in community cases with a few clients infected as well. To get back on track, our multi-disciplinary team (Doctor, Nurse Manager, Medical Social Worker and Physiotherapist) worked together with Tan Tock Seng Hospital Palliative Medicine, Medical Oncology team and Respiratory and Critical Care Medicine (RCCM) team to organise a presentation during a roadshow on 16 and 24 June 2021 with an average increase of 5 referrals and at least 3 admissions per month to continue serving as many clients as possible.

R.I.S.E-ING TO THE OCCASION

More than a year into the programme, the Restitutive. Integrative. Supportive. Empowering (R.I.S.E) programme had 13 clients enrolled between January 2021 and March 2022.

Through a multidisciplinary team comprising doctors, nurses, medical social workers, spiritual counsellor, occupational therapists and physiotherapists at Dover Park Day Care, the 12-week programme provides individualised rehabilitation, nursing, psychosocial and social support to empower clients in developing self-mastery skills so

that they can better manage their breathlessness and anxiety and optimise physical functions through functional pulmonary rehabilitation.

A joint-programme by Dover Park Day Care, Tan Tock Seng Hospital Palliative and Respiratory Medicine and Ren Ci Hospital, R.I.S.E aims to empower patients with chronic non-cancer lung diseases with the needed skills and abilities to manage their condition so as to reintegrate into the community.



NURSES' MERIT AWARD 2021

Our Nurse Manager from Inpatient Service, Sister Yeoh Kim Choo was one of the recipients for Nurses' Merit Award in 2021.



Since 1976, the Nurses' Merit Award is presented to nurses who have displayed noteworthy and exceptional performance over the past three years, participated in professional development, and contributed to promoting the nursing profession in our society.

Nurse Clinician Katherine Lim



Senior Staff Nurse Me Me Oo



Senior Enrolled Nurse Sui Hnaing



Nursing Aide Pamela Kristine



Senior Healthcare Attendant Myat Myat Maw

CERTIFICATION IN INFECTION CONTROL LIAISON

Nurse Clinician Chang Yee Yee and Staff Nurse Narissa attained a certification in infection control liaison upon successful completion of the course by the Asia Pacific Infection Control Society in August 2021.

DOVER PARK HOSPICE NURSES' DAY - DIRECTOR OF NURSING AWARDS 2021

Five nurses – Nurse Clinician Katherine Lim from the Home Care team and four nurses from our Inpatient team – Senior Staff Nurse Me Me Oo, Senior Enrolled Nurse Sui Hnaing, Nursing Aide Pamela Kristine and Senior Healthcare Attendant Myat Myat Maw received the Director of Nursing Awards for their outstanding performance.

Home Care

CONTINUED GROWTH IN NUMBER OF PATIENTS

In the past one year, the number of patients served by our Home Care team has grown by more than 40% from 400 to 700 patients as compared to the previous year.



PROGRAMME IMPACT (INTEGRATED MANAGEMENT AND PALLIATIVE CARE FOR TERMINALLY-ILL NON-CANCER PATIENTS)

A collaboration between Dover Park Home Care team and Tan Tock Seng Hospital, Programme IMPACT was started in August 2020 to care for patients with end stage organ disease. In July 2021, the team started to serve patients with end stage heart failure and end stage lung disease in February 2022. The number of patients has doubled from 33 to 65 as of March 2022 since the programme started in 2020.

EXTENSION OF COVERAGE AREA

In improving accessibility of home hospice care, our Home Care team has increased its area of coverage to five new postal districts in Yishun, Sembawang, Seletar and Springside, so as to serve more patients in the northern part of Singapore.



EXPONENTIAL GROWTH IN TELEMEDICINE

With support from the Agency of Integrated Care (AIC) on the use of telemedicine in home palliative care service, our Home Care team continues to embrace and leverage the use of technology to enhance care provided to patients and their caregivers without compromising on the quality of care.

The team has seen an exponential growth in the use of telemedicine with increase in the number of teleconsultation sessions from 119 (FY20/21) to 685 (FY21/22).

Social Work and Psychosocial Services (SWPSS)

REBOOTING 'NAMASTE CARE' FOR PATIENTS

As our nation advances towards the endemic phase, our SWPSS team, in collaboration with our Palliative Rehabilitation team, have rebooted the Namaste Care, a programme that integrates compassionate nursing care with individualised sensory-based activities for our inpatients and Day Care clients in January 2022, along with a series of other events that were planned throughout the year to reintroduce Namaste Care with the aim of incorporating it as part of Dover Park Hospice culture.

Developed by Joyce Simard from the USA, Namaste Care is a multi-approach care programme that uses sensory, psychosocial and spiritual elements to enhance the quality of life of persons with advanced dementia.

#DPHCARES

tapping on technology, #DPHCares is a virtual support group for caregivers. Through the use of messaging application, Telegram, caregivers are able to access useful caregiving resources, as well as share their caregiving experiences, challenges and inspiration stories with one another. This has provided a platform for caregivers to continue receiving respite and social support despite the restrictions on physical gatherings imposed during the pandemic.



TAPESTRIES OF GRIEF 2021

Our SWPSS team had participated in the inaugural Tapestries of Grief, a community engagement project organised by Grief Matters and held in conjunction with Grief and Bereavement Conference 2021.

A month-long festival (4-25 September 2021) with a series of community art exhibitions, talks and workshops, our clinical team comprising doctors, nurses, medical social workers, art therapist, music therapist, rehabilitative therapists participated in facilitating the events. Internally, our medical social workers and art therapists also worked with some of our patients in making remembrance balls to honour their friends who have passed on, as one of the exhibits at the art exhibition.

These art-making sessions were also extended to our clinical team to provide a safe space to practise mindfulness, self-care and the importance of being present as they reflected on personal grief experiences and those of supporting a person going through similar grief and loss.

INTERNATIONAL SHARINGS

1. Medical Social Worker, Lee Wei Ting was invited by Drama Box to participate in Touch '触る', an inter-city, inter-cultural exchange project between Singapore and Tokyo on the dignity and humanisation of care with a series of exchanges between August 2021 – January 2022.

EXPLORING NEW FRONTIERS: TELEMEDICINE AND TELETHERAPY AT DOVER PARK HOSPICE

Our multidisciplinary team - Nurse clinician, Katherine Lim, Music therapist, Camellia Soon and Medical Social Worker Clara Kong shared their experiences in maintaining normalcy and delivering care to their patients through telemedicine and teletherapy amid the pandemic at the Singapore Hospice Council's Multidisciplinary Palliative Care Forum on 6 October 2021.

Moderated by the Head of Dover Park Home Care, Dr Yee Choon Meng, the session covered topics such as the benefits and effectiveness of teleconsultation for home care patients, how virtual music therapy can continue to bring comfort and enjoyment to patients in various settings and how we shifted our pet-assisted activity from in-person to a virtual platform.



Photo credit: Singapore Hospice Council

We are Moving!



Due to COVID-19, the construction of our new building at Integrated Care Hub was delayed. With relaxed COVID-19 measures, construction has been expedited and we aim to move in to our new home by the end of 2023.

The new premise will boost 100 inpatient beds with more sophisticated clinical infrastructure.

INCEPTION OF DOVER PARK HOSPICE CAREGIVERS' RESPITE CARE FUND

In February 2022, the Caregivers' Respite Care Fund was established to provide respite care for caregivers who were experiencing burnout and stress from their caregiving responsibilities. The fund allows them to engage professional caregivers to take care of their loved ones for a specific period of time, so that they can take time off to rest and settle personal matters with peace of mind.

PROMISING SOCIAL WORKER AWARD 2021

Medical Social Worker (Home Care), Michelle Lau was conferred the 'Promising Social Worker Award' at the Istana by President Halimah Yacob on 23 November 2021.



Organised by the Singapore Association of Social Workers (SASW) and supported by the Ministry of Social and Family Development (MSF), the award recognises exemplary social workers who have made a difference in the lives of their clients as well as the community.

R21

To render support, improve the morale and regulate emotions of staff who faced intense challenges in their daily work, our SWPSS team rolled out a new initiative, R21 in July 2021 to provide staff support through experiential activities such as music, art, art pieces every quarterly.

Dover Park Hospice Research and PaIC Research

STUDIES PUBLISHED

1. Funded by the Agency for Integrated Care (AIC) Intermediate Long Term Care (ILTC) research grant, Dover Park Hospice completed the “Characteristics of Palliative Homecare Patients at the Final Place of Care within an Integrated Healthcare Model” study where the findings were presented at the AIC learning forum and published in the BMC Palliative Care in October 2021.
2. In October 2021, findings from the “Factors Associated with Family Caregiver Burden of Home-dwelling Patients with Advanced Dementia” study highlighting the challenges faced by family caregivers of home-dwelling patients with advanced dementia were published in the Journal of the American Medical Directors Association.
3. Dr Mervyn Koh, Medical Director of Dover Park Hospice has published a qualitative study “Burnout in Palliative Care – Difficult Cases: Qualitative Study” on understanding the burnout and emotions experienced by veteran palliative care clinicians in BMJ Supportive and Palliative Care in March 2022.

PALC RESEARCH GRANT

A total of \$83,350 was awarded to three applicants – Ms Chia Gerk Sin (TTSH), A/Prof Andy Ho Hau Yan (NTU LKCMedicine), and Dr Joshua Lee Shaowen (TTSH) in the area of end organ disease, advanced cancer, community palliative care, caregivers’ needs, education, and ethical issues at the end of life.

PALLIATIVE CARE CONFERENCES

Dover Park Hospice staff and the PaIC research team participated in two palliative care conferences – the 14th Asia Pacific Hospice Conference (APHC) in November 2021, and the 7th Singapore Palliative Care Conference (SPCC) in December 2021. Two posters – “Final place of care determinants of advanced cancer patients receiving integrated home-based palliative care” and “Factors associated with family caregiver burden of home-dwelling patients with advanced dementia” were presented at APHC while an oral presentation and ten posters in relation to symptom burden, family caregivers’ needs, teleconsultation, palliative rehabilitation, music therapy, and end-stage organ failure were presented at SPCC. The team received 2nd prize for the oral presentation and a 3rd prize for the poster competition at the conference.

PaIC

PALC APPOINTED AS A LEARNING INSTITUTE UNDER AIC LEARNING INSTITUTES NETWORK 2.0

At the start of 2021, PaIC was appointed as one of the eight learning institutes under the Agency for Integrated Care (AIC) Learning Institutes Network 2.0. In 2022, PaIC continued into its second year under this appointment. From April 2021 to March 2022, it has conducted eight runs of the following AIC-subsidised courses for participants mainly from Community Care Organisations:

- Certificate in General Basic Palliative Care (CGBPC)
- Talk on Pain Management (for nurses)
- 2 runs of Certificate in Community Palliative Care: Psychosocial Care (CCPC)
- Essentials of Thanatology: Death, Dying and Bereavement (EOT)
- Palliative Care in Advanced Non-cancer Conditions (PCAN)
- 2 runs of CLEAR (Communication, Law, Ethics and Professional Regulations) Course on End-of-life Care

EQUIPPING HEALTHCARE PROFESSIONALS WITH BETTER PALLIATIVE CARE KNOWLEDGE AND SKILLS

PaIC has conducted seven courses (some with multiple runs) covering these areas in palliative care – palliative care in advanced dementia and non-cancer illnesses, pain management, coping with bereavement, and the psychosocial, spiritual, rehabilitative, nursing, legal and ethical aspects of end-of-life care. A total of 416 healthcare professionals attended these courses.

Apart from the AIC-subsidised courses, PaIC also conducted these non-AIC-subsidised courses:

- Geriatric Palliative Care in Advanced Dementia
- Basic Qualitative Research in Healthcare

COLLABORATION WITH SINGAPORE HOSPICE COUNCIL

In April 2021, PaIC collaborated with the Singapore Hospice Council (SHC) on a new course titled “Certificate in Community Palliative Care: Psychosocial Care”. As the inaugural course was well-received and oversubscribed, a second run was held in August 2021 and the course was added into the suite of PaIC regular courses conducted annually under the Agency for Integrated Care Learning Network.

7TH SINGAPORE PALLIATIVE CARE CONFERENCE (SPCC) 2021

In December 2021, PaIC was privileged to organise one of the three conference workshops titled “Communication, Law, Ethics and Professional Regulations (CLEAR)”. This well-received ethics workshop was helmed by Adjunct Assistant Professor Neo Han Yee, Adjunct Professor James Low, Adjunct Assistant Professor Allyn Hum and Dr Sumytra Menon.



Training Department

CLINICAL ATTACHMENTS

A total of 76 healthcare professionals had their clinical attachment stint in our hospice. This comprised of:

- 41 Medical Doctors
- 31 Nurses
- 4 Allied Health Professionals

RESUMPTION OF THE SPECIALIST DIPLOMA IN PALLIATIVE CARE NURSING

28 registered nurses were enrolled in our Specialist Diploma in Palliative Care Nursing (SDPCN), held in collaboration with Ngee Ann Polytechnic (NP) and the National Cancer Centre (NCC). The course commenced in April 2021 after a year of hiatus due to the pandemic in 2020 and was carried out virtually



as cross movement among healthcare professionals was not encouraged then. The course utilised online assessment technology such as e-proctoring by Ngee Ann Polytechnic for high stake examinations per module.

HEALTHCARE PROFESSIONALS TRAINED IN PALC COURSES LED BY DOVER PARK HOSPICE

Training was provided to 60 healthcare professionals in two courses led by Dover Park Hospice, where the design of the programme is curated and taught by clinicians from Dover Park Hospice.

- 38 professionals attended the talk on Pain Management
- 22 professionals signed up for the Certificate in General Basic Palliative Care for Allied Health Professionals (CGBPC)

Pharmacy

AUTOMATING THE INPATIENT JOURNEY

Our Pharmacy team has embarked on a project to improve medication safety and increase work efficiency. In upgrading our clinical system, the ordering, dispensing and administration of the medications will be made automated. This is to ensure safe, appropriate, and efficacious use of medications for our patients.



Fundraising

DOVER PARK HOSPICE CHARITY GOLF 2021

We held our biennial charity golf – “Swing with Compassion” at the Tanah Merah Country Club on 28 April 2021. The golf tournament started after lunch with 34 flights and a staggered tee off to ensure social distancing and the safety of our guests. Through this event, we raised close to \$340,000 with the immense support from donors and sponsors.



2021 ANNUAL YEAR-END FUNDRAISING MAILER

More than \$250,000 was raised from this annual fundraising mailer. With the theme “Angels”, we recognise the efforts of our nurses who play a key role in journeying with the patients. We are grateful to our volunteers who helped to send out over 9,000 mailers in two weeks.



Volunteer Programme

SINGAPORE PATIENT ACTIONS AWARD 2021

Our Pet-Assisted Activity volunteers from the Ruby Group were recipients at the Singapore Patient Action Awards 2021, clinching the award for Singapore Patient Support Group / Volunteer Group.

Since 2001, the volunteers make physical visits to our hospice twice a month with their pets to engage the inpatients at Dover Park Hospice. However due to COVID-19 and social distancing measures, the activity had to be carried out through virtual means.

Since then, the group has continued to engage patients through tele-visits facilitated by our Volunteer Programme team and Medical Social Workers twice a month, bringing smiles to the patients through showcasing their pets and interacting with the patients.

DOVER PARK HOSPICE VOLUNTEER AWARDS

Every year in celebrating International Volunteer Day, we will express our heartfelt appreciation to our volunteers through our very own Dover Park Hospice Volunteer Awards.

Most Supportive Volunteer Award:
Ms Evelyn Ho
Mr Gilbert Lew



New Normal Award:
Day Care Volunteers (Tele-visits)



Ruby Group Volunteers (Tele-visits)



Honour Walk

In April 2021, in honouring patients who have passed on in the hospice, our clinical colleagues stood in line as a team while a patient was conveyed to the ‘Lying-in’ room.

Aligning to one of our care values – “Dignity till the very end”, the honour walk allows our clinical care team to bid goodbye to patients whom they have cared for and give them the dignity they deserve till the end.



Palliative Rehabilitation

BRAVEHEART PROJECT

Started in 2020, the Braveheart Project aims to enhance cognitive and psychological care for patients with cognitive impairment through environmental and cognitive-based therapy. Our current intervention tool kit include cognitive games for varied levels and interests, fidget apron and items, therapy doll and mechanical tabby cat, reminiscence knick knacks and more. These helped to facilitate cognitive engagement for our patients with delirium and dementia, with more benefits observed in the latter group and thus will be largely our target focus for the project in the coming year. While the effects of Braveheart interventions may be transient, these items identified have shown to hold individuals’ attention and provided alternative means of engagement or distraction to relieve care from staff and family.

POSTERS PRESENTED AT THE SINGAPORE PALLIATIVE CARE CONFERENCE 2021

In sharing more insights on palliative rehabilitation, our Palliative Rehabilitation team presented two scientific posters at the Singapore Palliative Care Conference 2021:

1. The Skills and Context Needed by Occupational Therapists to Practise Effectively in an Inpatient Hospice: A Case Study by Senior Principal Occupational Therapist, Grace Sim
2. How much is too much? Physical Activity and Exercise Prescription and Outcomes in Patients with End Stage Liver Disease – A Mixed Methods Review by Head of Palliative Rehabilitation Unit, Roxanne Foo

EDUCATION

In sharing palliative rehabilitation practice across settings in Singapore, Senior Principal Occupational Therapist Grace Sim and Head of Palliative Rehabilitation Unit, Roxanne Foo have participated in the teaching of nursing and other allied health professionals in PaIC’s SDPCN, GDPC and LCPC palliative care courses. The Team is open to collaboration and endeavours to continue spreading the spirit of rehabilitative palliative care in practice across care settings in Singapore.

TIMELY REASSESSMENT AND TARGETED PERSONALISED INTERVENTION BY THERAPISTS TO ENHANCE CARE AND EXPERIENCE WITHIN THE HOSPICE

Even with a terminal condition there is still life to live in the time remaining. Our patients have benefitted in many ways from tailored engagement by our rehab team in opportunities for therapeutic mobilisation such as a change of environment from the bed/ward to engage in personal and meaningful activities like gardening. As the functional abilities of our clients change with disease progression, timely reassessment by the rehab therapists help to ascertain changes in their level of care and mobility support needs. This helps the team to readjust care support or planning for equipment required to maintain optimised care for our patients. Our therapists are also involved in numerous home leave and discharge planning where they provide support across the three care services, optimising physical function, equipment prescription and caregiver training for continued quality in the community and at home.



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HAPPINESS CAN BE FOUND IN THE SIMPLEST OF THINGS.

For Madam Chong Tai Moy, her happiness lies in spending quality time with her husband and five children. Back when Madam Chong was working three jobs a day, she was not able to spend time with her children when they were younger.

In one of her Art Therapy sessions, she shared with our Art Therapist that she wished to pass on her recipes to her children. As someone who prides herself in preparing Hakka dishes, Madam Chong wishes to pass on her culinary skills to her children, in hope that one day, they too will take pride in the dishes and carry on her legacy.

With the help of our Social Work and Psychosocial team including colleague from Palliative Rehab, the team arranged a cooking session for Madam Chong's children to cook Hakka Yong Tau Foo under their mother's guidance at the al fresco area of our hospice. To carry on their mother's legacy, our Art Therapist had also nicely compiled Madam Chong's recipes into a book for her children.

Madam Chong was very delighted and touched to see her husband and children making time for the cooking session where the family bonded over the scrumptious Yong Tau Foo and spent time together as a family.



REMEMBERING MADAM YEO ONE COLOUR AT A TIME

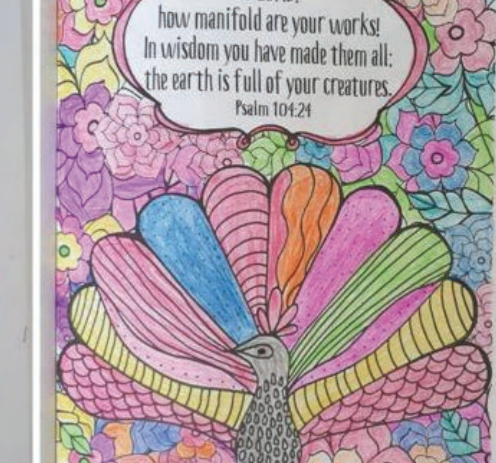
This array of beautifully coloured art pieces was the pride of Madam Yeo Lee Khow, a late home care patient of Dover Park Hospice, who had an innate love and passion for colouring.

After being diagnosed with a major form of brain tumour, she was taken care of by our Home Care team for a month before her passing in July 2021. Madam Yeo was a fervent traveller who had been to over 24 countries, including destinations like the Mediterranean, Australia and New Zealand which she held dear to her heart.

As someone with a refined interest in food, she had excellent cooking skills and specialised in making scrumptious dishes like the Hakka Yong Tau Foo, Salted Fish with Tofu and Abacus Yam Seeds.

Despite the gradual decline in mental capacity, art provided Madam Yeo with another avenue to express herself and channel her inner talent and eye for shading and colouring.

Between the years 2017 to 2020, Madam Yeo created over 300 spectacular pieces of colouring works as a hobby. From these pictures, we can appreciate some of her beautiful art pieces such as her "Birds n Butterflies" Series, as well as her "Wild Life" Series of compiled art works.



Stories of Our Patients

Patient Statistics

	Inpatient	Home Care (Programme Compassion, Programme Dignity and Programme Impact)	Day Care
Number of Patients Admitted	374	639	28
Gender (Female)	150	365	8
(Male)	224	274	20
Length of Stay (Average Days)	33	84	128
Average Age	74	79	74
% of low income patients	69.8	62.4	82.1

LEAVING A LEGACY IN HARMONICA MUSIC

With a fervent passion for playing the harmonica, the late Mr Alan Lim, 81, was a self-taught harmonica player since the age of 12. Since then, harmonicas had become a major part of his life and he was dedicated in promoting the music of harmonica in the 1960s through local radio, Rediffusion and in starting the Hamiton Harmonica Quartet as well. As a well accomplished harmonica player cum conductor, Mr Lim had personally hand-written four books of harmonica tabs comprising of various genres of songs from the 1960s.



Speaking at a cosy book-signing event at our hospice organised by our Social Work and Psychosocial Services team, Mr Lim who was an in-hospice patient with us, gave a boisterous speech in Mandarin where he hoped his books can be passed on to the younger generations and help to elevate the techniques of harmonica-playing. Mr Lee Chin Wah, President of the Harmonica Aficionados Society (Singapore) and long-time friend of Mr Lim, attended the event in support and appreciation of Mr Lim who was one of the pioneers of the Society.



COOKING IS A FORM OF ART AND EXPRESSION. ADD A LITTLE LOVE, AND IT BECOMES A LEGACY.

The late Madam Noraini was a 62-year-old home care patient with Dover Park Hospice who had been diagnosed with chronic kidney disease. Despite that, her passion for cooking served as fuel for her to share her favourite recipes with her family and friends.

To Madam Noraini, cooking symbolised togetherness and love. When she was young, she learnt how to cook from her late father and subsequently, she cooked for him when she grew up. Madam Noraini often reminisced about the fond memories with her late father and the look of satisfaction on his face whenever he tasted her food.

Madam Noraini's passion for cooking was eventually materialised into a recipe book compiled by our social workers and psychosocial services team. It was passed on to her niece for her personal keepsake.



Guided by our motto – **Every Moment Matters,** our **“Make-It-Happen”**

project is a collaborative effort by our clinical colleagues. Through this project, we aim to help fulfil the wishes and most importantly, **celebrate the lives of the people we serve.**





OVER
10950

DAYS

Meeting growing needs in
palliative care from cancer
to non-cancer illnesses

Integrating Research

Research and Training

DOVER PARK HOSPICE RESEARCH AND TRAINING

As a purpose-built hospice, we pride ourselves in delivering quality evidence-based palliative and end-of-life care that offers the highest standards of holistic care for our patients and their families. To meet the ever-growing demand for palliative care - from cancer to non-cancer illnesses as the population ages, we collaborate with various institutions on high-quality research studies to gain insights into the challenges faced by patients with life-limiting diseases and their impact on families, caregivers and the healthcare system. Knowledge derived from these research not only equips our clinicians to better care for patients and caregivers but also informs resource allocation and policy formulation, thereby co-creating a robust healthcare system.

As we strive to be the Centre of Excellence for palliative care services, education and research, we recognise the integral role that training and education play in building the capabilities of our healthcare community. We remain dedicated to providing year-round training opportunities for our doctors, nurses and allied health professionals, and offering clinical attachments to healthcare professionals and students in supporting their professional development.

Our efforts in training and research is underpinned by our desire to create a lifelong learning culture here at Dover Park Hospice. We regularly provide all staff with a myriad of upskilling opportunities including e-learning courses, weekly professional sharing, journal clubs and tutorials.



THE PALLIATIVE CARE CENTRE FOR EXCELLENCE IN RESEARCH AND EDUCATION (PaIC)

Established in October 2017 as a tripartite collaboration between Dover Park Hospice, Nanyang Technological University (NTU) Lee Kong Chian School of Medicine and National Healthcare Group, the Palliative Care Centre for Excellence in Research and Education (PaIC) aims to leverage on the strengths, capabilities and capacities of its partner institutions to advance palliative care research, especially in non-cancer illnesses. Amidst a changing demographic with increasingly complex care needs as the Singapore population ages, PaIC endeavors to expand the evidence base for patient-

centered palliative care delivery. In particular, it has embarked on studies evaluating the effectiveness of community palliative care models to meet patients' preferences and the national agenda for home death.

In July 2018, PaIC was appointed as one of Agency for Integrated Care's (AIC) Learning Institute for the Community Care Sector. In this role, PaIC conducts programmes that empower and equip community healthcare providers with the relevant skills to deliver quality end-of-life care that helps patients journey through their final days with dignity:

- Certificate in General Basic Palliative Care
- Talk on Pain Management

For more information on our research and training, please visit <https://www.paic.org.sg/>

Donors List

Deepest appreciation to our individual and corporate donors for their contributions (\$1,000 and above) in the past year.

Thank you for your continued support towards our cause and see our patients through their difficult times.

Individuals

A
Albuquerque Karen Anne
(IMO - Albuquerque Ruby Nee Koh Kit Neo Ruby)
Alok Sinha
Ang Jwee Hereng
Ang Koon San, Sunny
(IMO - Ang Yong Sing)
Armin Maechtel
Aspiah Binte Basman
Au Oi Leng
Aw Kian Heng

B
Benny Yeo Kok Hwee
(IMO - Betty Hoe Geck Eng)
Boh Toon Hwe
(IMO - Lye Siew Luan)

C
Caers Lucas Henri R.
Chan Ah Choo
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Chan Peng Chew, Mark (Dr)
Chang Lai Yoke
Chang Seow Kiak
Chang, Lotus
(IMO - Chew Yok Ling)
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Cheah Li Yean
Cheang Boon Liang, Kelly
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Cheng Le Fern
Cheng Nyuk Feng
(IMO - Tai Lian Neo)
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Chew Gek Khim
Chey Chor Wai
Chia Ah Keow, Dawn
Chia Ee Han
Chia Kok Seng
(IMO - Pang Yeow Choo)
Chia Lay Hoon
Chia Mangieri, Pauline

Chia Piah Yam
Chia Soo Hien
Chiang Khim Kee
Chin Chi Onn, Colin
Chin Yau Seng
Chin Yong Hwa
Chong Bee Leng
Chng Chee Kiong
Chng Hwee Hong
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Chong Leng Fatt
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(IMO - Chong Yeow Kwong)
Chong Yu Moi
Choo Bee Li
Choo Mee Sian
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(IMO - Low Ah Moy)
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Chow Oi Lin
Choy Yuet Sin
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Chua Kim Chiu
Chua Yeow Leng
Chung Chun Yee, John

D
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(IMO - Ong Kim Ling)

E
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Eng Hsi Ko, Peter (Dr)
Eng Siu Sien, Lisa

F
Fae Sugiharto
Fong Sook Han
Foo See Kim
Foo Soo Hui
Foo Yee Ling

Khoo Whee Luan
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Koh Kok Ong
Koh Leng Leng
Kong Jing Wen
Kong Yuet Peng
Kuah Wan Keng
Kwa Xuan Wei
(IMO - Lee Jee Moy)
Kwek Kon Yew (Dr)

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Lee Shu Yen
Lee Sweet Chan
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Li Ying Yao
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Lim Hock Chee
Lim Hock Choon
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(IMO - Sim Sai Hong)
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Lim Kong Eng
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Lim Tan Soo Kim
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Lim, Debbie
Liu Earnler
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Loi Oi Kuan
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Loke Wai Yin
Loke Yuen Kin, Ruby
Loo, Eunice
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Low Chee Wah
Low Cheng Hock
Low Mei Kew
Low Tut Choon
Lum Lai Foon
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Lye Chee Yoong, Kevin

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Moezz H Nakhoda

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Ong Siew Tin
Ooi Chung Mui, Lucy (Dr)

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(IMO - Theepam Murugasu, Werner Kahrs)

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Quah Chien Choon, Terence
Quek Kwang Sieah
Quek Shiou Yong
Quik Lee Lee

R
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(IMO - Ivy Armstrong)
Robert Law Ken De Boer

S
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Seah Chee Hwee

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Seet Ai Mee (Dr)
Seet Iris
Sembagavalli Kamalarajan
Seow Wooi Fen
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Sim Shi Qiang, Nick
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Siow Fung Wai Ying
Siow Kon Sang nee Lily Seet
Sng Tiong Yee
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Sohmen-Pao Doris, Susan
Soon Kok Boon
(IMO - Seah Ah Lek)
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Tan Boon Hui
Tan Cheng Kian
Tan Cheo Koo
(IMO - Tay Lye Ooh)
Tan Chew Peng, Leah
(IMO - Lim Siam Lang)
Tan Choon Lai
Tan Chwee Lee, Connie
Tan Chwee Oh
(IMO - Toh Huay Kew)
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Tan Hong Beng
Tan Hsuan Heng
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Tan Kheng Lee, Arnold
Tan Kian Heong
Tan Kim Kwang
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Tan Lee Hong
Tiffany Varinata
Tin Keng Seng
Tiong Shu
Tiong Siew Geok
Toh Poh Kow
Tok Teck San
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Tseng Charles

W
Wan Fook Weng
Wang Chew Juat
(IMO - Cheng Kiam Wah)

Tan Wee Keong, Kasper
Tan Wei Fang, Geraldine
Tan Whei Mien, Joy
Tan Wi Jian, Andy
Tan Wu Hao
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Tan, Jimmy
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Wong Wai Yin
Wong Weng Sun
Woon Siew Leng
(IMO - Woon Wei Tuck)
Woon Wee Seng
(IMO - Chua Cheng Lye)
Wu Huei Yaw (Dr)

X
Xiao Li

Y
Yak Zhaoying
Yam Ah Mee
Yang Yuen Tsy, Caroline
Yap Boh Wei (Dr)
Yap Chee Wah
Yap Er Chin
Yap Pett Chin
Yap Poh Tee
Yap Siew Moi
Yaw Chee Ming
Yeang Xian Wei (Dr)
Yeap Lam Hong
Yee Lai Ching
Yeo Lay Yong
Yeo Lik Seng
Yeo Tiam Chye
Yeo Wee Kiong
Yew Ah Looi
Yip Yoke Ping, June
Yip Yue Lee
Yong Choon Mun
Yuan Puay Chin, Vivian
Yue Too Neng
(IMO - Yue Tao Kang)
Yuen Wei Yi, Gerard
Yung Sek Hwee
(IMO - Professor Cynthia Goh)

Z
Zeng Ling, Antonia

Organisations

A
Access Direct Pte Ltd
Akeles Consulting Pte Ltd
Alcare Pharmaceuticals Pte Ltd
Amber Electronics Pte Ltd
Asia-Beni Steel Industries (Pte) Ltd

B
Ban Nee Chen Pte Ltd
BDO LLP
Beauty One International Pte Ltd
Beaver Contromatic Pte Ltd
Bycanary Pte Ltd

C
Char Yong (Dabu) Association, Singapore
Chew How Teck Foundation
ComfortDelGro Corporation Limited
Context Interactive Pte Ltd
CYS Global Remit Pte Ltd

D
D.S. Lee Foundation
DP Architects Pte Ltd
DPH Diamond Group
DPH Jade Group
Duke Bakery Pte Ltd

E
EMC Resources Pte Ltd
Erabelle Pte Ltd
Eu Yang Sang (Singapore) Pte Ltd

F
Fraser's Property Retail Management Pte Ltd
Freshmart Singapore Pte Ltd

G
GNS Storage Pte Ltd
Grandlux Private Limited

H
Health & Fertility Centre

I
I.R.B. LAW LLP
Impact Life Style Inc. Pte Ltd
Isaac Manasseh Meyer Trust Fund
Isetan Singapore Limited

K
Kanlian Ferry Pte Ltd
Keppel Care Foundation Limited
KMP Private Ltd

L
Lee Foundation
Lee Kim Tah Foundation

M
Maison Ace Pte Ltd
Mellford Pte Ltd
Mitsubishi Electric Asia Pte Ltd

N
National Council of Social Service
Neoasia (S) Pte Ltd
Nera Telecommunications Ltd
Newman Corporate Services Pte Ltd
Nexcomm Asia Pte. Ltd.
NTUC Fairprice Foundation Limited
NTUC FairPrice Co-operative Ltd

O
Odyssey Technical Solutions (S) Pte Ltd

P
Parkway Group Healthcare Pte Ltd
Pei Hwa Foundation Limited
Prive Clinic Pte Ltd

Q
Q&M Dental Group (Singapore) Ltd

R
Riverhub Pte Ltd

S
Sharikat National Pte Ltd
Sim & Yeo Co Pte Ltd
SINCL Pte Ltd
Singapore Buddhist Youth Mission
Singapore United Estates (Pte) Ltd
Solitaire LLP
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T
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Tampines Chinese Temple The Community Foundation of Singapore
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The Ngee Ann Kongsi
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U
UK Online Giving Foundation
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W
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Wing Ship Marine Services Pte Ltd

Z
Zu-Lin Temple Association



Our Mission

To Provide Comfort, Relief of Symptoms and Palliative Care to Patients with Advanced Disease Regardless of Age, Race or Religion and to Support Grieving Families

Our Vision

To be the Centre of Excellence for Palliative Care Services, Education and Research

Our Core Values

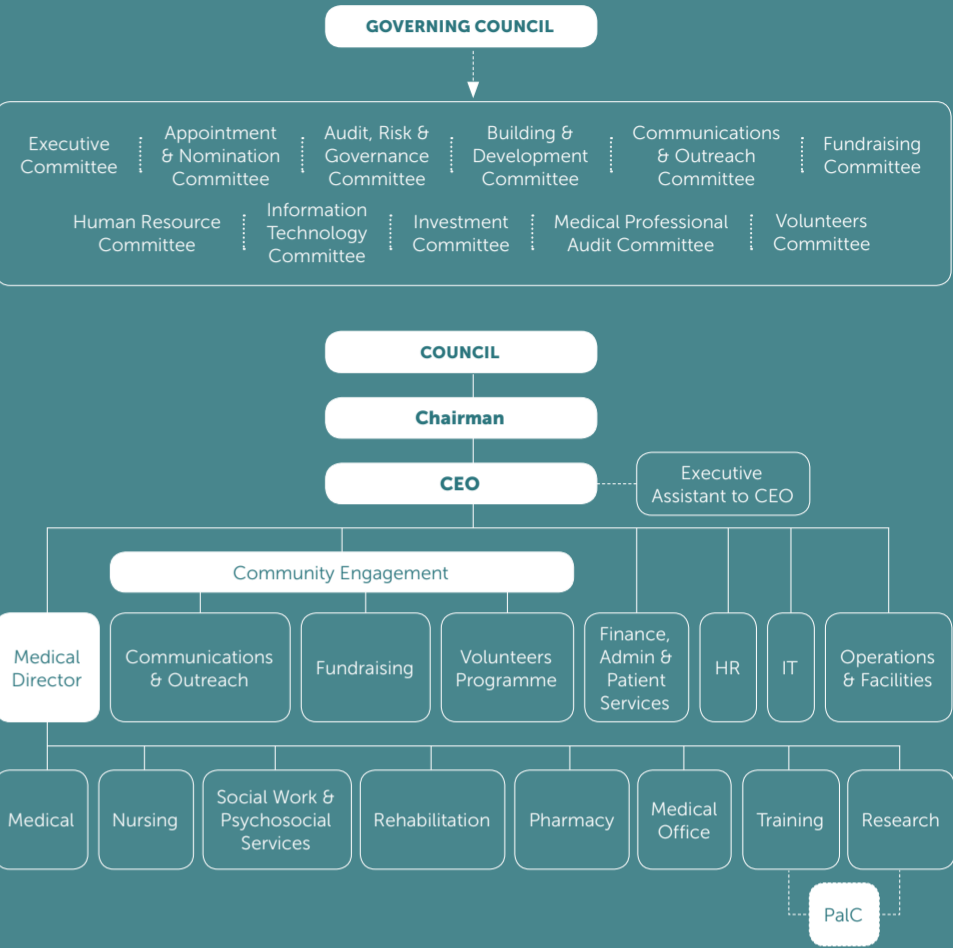
Excellence, Team Work and Compassionate Care

Our Care Values

Dignity till the very end
Compassion as a way of life
Alive despite end of life
Respect choices of patients
Essential Care



Our Council Structure



Note:
The Palliative Care Centre for Excellence in Research and Education (PaIC) is a tripartite collaboration among Dover Park Hospice, Nanyang Technological University (NTU) Lee Kong Chian School of Medicine and National Healthcare Group.

Governing Council



A/PROF JEREMY LIM
Chairman
30th Governing Council

DATE OF LAST ELECTION
22 August 2020

OCCUPATION
Director
Global Health Program
Saw Swee Hock School
of Public Health, National
University of Singapore
Co-founder & CEO
AMILI



MS ANGELENE CHAN
Vice Chairman
Chairman, Building &
Development Committee

DATE OF LAST ELECTION
21 August 2021

OCCUPATION
Chairman
DP Architects & its Group of
Companies



PROF HO YEW KEE
Honorary Secretary
Chairman, Investment
Committee

DATE OF LAST ELECTION
21 August 2021

OCCUPATION
Professor of Accounting
Associate Provost
(Special Duties)
Cluster Director, Design and
Specialised Businesses
Singapore Institute of
Technology (SIT)



MS CHENG YOKE PING
Assistant Honorary
Secretary

DATE OF LAST ELECTION
21 August 2021

OCCUPATION
Partner
Rajah & Tann Singapore



MS DIANE CHEN DAN
Honorary Treasurer

DATE OF LAST ELECTION
21 August 2021

OCCUPATION
Senior Vice President
Finance, China
Sembcorp Industries Ltd



MS ONG AI HUA
Assistant Honorary
Treasurer

DATE OF LAST ELECTION
21 August 2021

OCCUPATION
Head of Government Affairs
& Policy
Johnson & Johnson Asia
Pacific



MR LOW CHEE WAH
Chairman
Audit, Risk & Governance
Committee

DATE OF LAST ELECTION
22 August 2020

OCCUPATION
CEO
Frasers Property Retail



MR PAUL D. GAGNON
Chairman
Communications &
Outreach Committee

DATE OF LAST ELECTION
21 August 2021

OCCUPATION
Consultant



DR KWA CHONG TECK
Co-Chairman
Fundraising Committee

DATE OF LAST ELECTION
22 August 2020

OCCUPATION
Senior Advisor
SingHealth



DR KAREN SOH
Co-Chairman
Fundraising Committee

DATE OF LAST ELECTION
22 August 2020

OCCUPATION
Medical Director
Laser Clinics Singapore



MS DEANNA ONG
Chairman
Human Resource
Committee

DATE OF LAST ELECTION
21 August 2021

OCCUPATION
Chief People Officer
GIC



MR SHEE GIM LENG
Chairman
Information Technology
Committee

DATE OF LAST ELECTION
22 August 2020

OCCUPATION
DD (Training and Learning
System) Policing Programme
Management Centre, HTX
Dy CIO, HTA



**ADJUNCT A/PROF MARK
CHAN PENG CHEW**
Chairman
Medical Professional Audit
Committee

DATE OF LAST ELECTION
22 August 2020

OCCUPATION
Divisional Chairman
(Integrative & Community
Care), Senior Consultant,
Tan Tock Seng Hospital



DR TANYA TIERNEY
Chairman
Volunteers Committee

DATE OF LAST ELECTION
21 August 2021

OCCUPATION
Assistant Dean, Clinical
Communication,
Lee Kong Chian School of
Medicine
Nanyang Technological
University



MR CHEY CHOR WAI
Member

DATE OF LAST ELECTION
22 August 2020

OCCUPATION
Consultant



MS MARLENE FOO
Member

DATE OF LAST ELECTION
22 August 2020

OCCUPATION
Retired
(Deceased)



MS WOO E-SAH
Member

DATE OF LAST ELECTION
22 August 2020

OCCUPATION
Partner & Head of Audit
RSM Singapore



DR LIONEL LEE
Member

DATE OF LAST ELECTION
21 August 2021

OCCUPATION
Retired



MR HENK R. DE GLINT
Member

DATE OF LAST ELECTION
21 August 2021

OCCUPATION
Managing Director &
Senior Advisor Singapore &
Southeast Asia,
JP Morgan Private Bank



MS SHEFALI SRINIVAS
Member

DATE OF LAST ELECTION
21 August 2021

OCCUPATION
Head of Business
Communications
Meta, APAC

Honorary Council Members



DR SEET AI MEE
Honorary Council Member

DATE OF LAST ELECTION
Not Required

OCCUPATION
Retired



DR JERRY LIM
Honorary Council Member

DATE OF LAST ELECTION
Not Required

OCCUPATION
Retired Doctor

Chairman’s Message



“Making More Moments Matter: Promoting greater care insights, Integrating Research, Imparting Knowledge” is the theme of our 30th Anniversary. It is an appropriate recognition of the grit, hard work and determination by our co-founders, Dr Seet Ai Mee and Dr Jerry Lim, astute council members, dedicated volunteers, generous donors and resilient staff in the past 30 years.

While we opened our door to terminally-ill patients back in 1995, our story started three years earlier. At the behest of then Permanent-Secretary of Health, Dr Kwa Soon Bee, both our co-founders, Dr Seet Ai Mee and Dr Jerry Lim came together to register the hospice as a charity in

November 1992 and rallied like-minded palliative care experts and policymakers in starting Singapore’s first purpose-built hospice.

Along with palliative care in Singapore, Dover Park Hospice has made great strides in the past 30 years. Originally, we were supposed to be located at Dover Road, but our location was met with opposition from the public to build a hospice next to a campus and we were allocated another plot of land at our current place – Jalan Tan Tock Seng. The timing could not be any apt as we relocate to the Integrated Care Hub @ HealthCity Novena at the end of 2023 and continue to write new chapters in our new home.

Recognising the need to support people to die at home, we started home palliative care in 2011 and palliative day care in 2019 to ensure uninterrupted care for patients at different stages of their illnesses. Typically, palliative care is extended to cancer patients, relieving them of pain and symptoms but the narrative of care has changed as we see the necessity and positive effects it has on non-cancer patients such as people with end-stage organ failure, advanced dementia, advanced lung diseases and severe frailty that aims to enhance their quality of life and optimise their ability to lead a meaningful and dignified life till the end. With the strong encouragement Minister for Health Ong Ye Kung who has been a tireless advocate for home palliative care, we will re-double efforts and expand our home services substantially in the coming months and years as I describe in more detail below.

We are proud of the progress made in our programme – *R.I.S.E (Restitutive, Integrative, Supportive, Empowering)*, a joint-programme with Tan Tock Seng Hospital Palliative and Respiratory Medicine and Ren Ci Hospital that provides individualised rehabilitation, nursing, psychological and social support to empower 17 patients with chronic non-cancer lung diseases with the skills and abilities to manage their condition in the past one year.

In February this year, our Home Care team has also begun to serve patients with end-stage heart failure and end-stage lung disease under *Programme IMPACT (Integrated Management and Palliative Care for Terminally-ill Non-cancer Patients)*, another joint programme with Tan Tock Seng Hospital, caring for patients with end-stage organ failure with the number of patients doubled from 33 to 65 in March 2022.

CATALYSING MORE RESEARCH

Since our humble beginnings, research has become a part of our DNA in providing evidence-based care and programmes. These, coupled with understanding the evolving needs of the patients and caregivers as the population ages and caregiving needs are essential to our continued service to the patients and broader community.

We are excited about ongoing studies such as a multi-centre randomised controlled trial to compare the safety and efficacy of drugs for managing hyperactive delirium in patients at the end of life and a mixed methods study in understanding the cost of caring for patients with advanced dementia.

BUILDING CAPACITY, CAPABILITY AND COMMUNITY IN HOME PALLIATIVE CARE

The COVID-19 pandemic has accelerated our journey in the use of technology to support patients at home. Boosting the use of teleconsultation has become part of our modus operandi to provide care remotely for stable patients. Our Home Care team has extended home palliative care to cover more zones in the northern-eastern and northern part of Singapore last year. The team has also started to see more patients with end stage heart failure and lung disease at the beginning of this year. This growth is no surprise given the hospice’s continued expansion of home palliative care to meet the increased need in supporting people with life-limiting disease to die at home surrounded by loved ones.

Palliative care is predicated on the notion of a good death, but it is not a one-size-fits-all approach. What constitutes a good death depends on one’s familial support, resources available and access to community-based services and more importantly, how one chooses to live out one’s last days at his/her own terms. This is why it is imperative to build a robust network of support in the community and make palliative care service readily accessible with smoother transitions between different care settings so that patient can receive the best care at the right time with ease.

THANKING OUR DONORS AND VOLUNTEERS

Volunteers remain the lifeline of the hospice where we have the privilege of having passionate palliative care specialists who played vital role during the establishment of the hospice 30 years ago. Volunteering in a hospice is a unique calling and we are fortunate to have our regular and long-time volunteers pressed on and constantly think out of the box and go out of the way to enliven the hospice and patients.

As we re-adjust to living with COVID-19, we look forward to welcome and host our donors in-person in October this year at our annual fundraiser where we will be holding our first-ever charity concert to celebrate moments made and making more moments matter for our patients and caregivers with local music celebrated over generations.

Last but not least, the hospice would not be what it is today without the impeccable teams – both clinical and non-clinical departments, in upholding the care values and belief in providing the best care for our patients and their families.

Dover Park Hospice’s commitment to the future of hospice care remains resolute as we continue to innovate and integrate our services and deliver on this promise through our care.



Dr Jeremy Lim
Chairman

Message from the CEO



The unprecedented COVID-19 pandemic has brought on catalytic changes in the way our hospice delivers holistic care to our patients and their families. During these challenging times, we have learned to balance safety with compassion, working with the authorities to make it possible for some family members to say goodbye to their loved ones in person. We have collaborated with a hospital partner to send a patient home to see his daughter for a final time. We learned to harness the power of technology to continue caring for patients via teleconsultation and tele-visits. I am thankful that the teams at Dover Park Hospice have banded together stronger than before, to overcome the adversities and remained steadfast in offering the best to our patients and their families.

BREAKING NEW FRONTIERS OF CARE

As we transit from pandemic to endemic mode of operation, we have readapted well to a new environment where we now manage and treat COVID-19 cases onsite with a new and approved drug treatment from Ministry of Health (MOH). The move to our new home at the Integrated Care Hub (ICH) is back on track as we now make the final preparations for the move by November 2023.

On Home Care front, we continue to see growth in the number of patients served by our hospice. In this past year,

the number of patients has notably increased by over 40% to 700 patients. In a move to cater to more patients, Home Care team has expanded into five more postal districts in the northern parts of Singapore, namely Yishun, Sembawang, Seletar and Springside. The *Restitutive, Integrative, Supportive, Empowering (R.I.S.E) programme* – a collaborative effort between Dover Park Hospice Day Care, Tan Tock Seng Hospital and Ren Ci Hospital that empowers patients with chronic non-cancer lung diseases to manage their condition, has also seen success in serving 17 clients since its inception in January 2021. Furthermore, our Inpatient team has made headway in patient care by conducting peritoneal dialysis, administering blood transfusion and deploying ventilators for patients.

Continuing the use of teleconsultation services and telemedicine to provide safe and effective care to patients from the comfort of their homes, the team will now extend these teleservices to include the allied health teams comprising social workers, music & art therapists, physiotherapists and occupational therapists, bringing teletherapy sessions to patients and providing tele-monitoring through home-based devices. Such effective use of technology will enable more end-of-life patients to receive the medical attention they need.

BESTOWING DIGNITY TILL THE END

Following the launch of our new D’CARE values, our clinical team embraced the value of “Dignity till the very end” and begun the practice of *Honour Walk* – a new initiative where our clinical colleagues stand in line and bid farewell to patients whom they have cared for as they are conveyed to the Lying-in room. Initiatives like this help us stay true to our

care values in our work and confers the dignity that every patient deserves till the very end.

ENABLING OUR CAREGIVERS

The COVID-19 pandemic has shown the importance of in-person connection to our overall health and well-being. Amidst social restrictions, many caregivers shouldered greater responsibilities of caring for loved ones while distanced from the support of friends and families, leaving them vulnerable to burnout and depression. Responding quickly to this need, our Social Work and Psychosocial Services team launched *#DPHCares*, a Telegram-based virtual support group to connect caregivers with various caregiving resources, and to facilitate mutual sharing of experiences, challenges and inspiration.

The *Caregivers’ Respite Care Fund* was also introduced to allow family members to engage professional caregivers to care for their loved ones for a short period of time, so that they may rest and find respite from their caregiving duties. Tending to loved ones who are terminally ill can be a long-drawn process that takes a toll on caregivers’ well-being. In our continuous effort to support and empower caregivers, a Dover Park Hospice Virtual Palliative Care Symposium will be held as part of our 30th anniversary celebration in 2023, to address issues surrounding caregivers’ mental health and burnout, and will feature an expert series on palliative care.

UPSKILLING AND EQUIPPING OUR WORKFORCE

As end-of-life patients’ needs become increasingly complex with more than one illness, the upskilling of our clinical

team to perform additional medical procedures is of paramount importance. Last November, our Nursing Department implemented the *Train the Trainer Programme on Non-Invasive Mobile Ventilation* targeted to equip our Inpatient and Home Care nurses, doctors and physiotherapists with necessary skills to operate and administer mobile ventilation for our patients at home or in the hospice.

We are also pleased to share that Nurse Clinician Chang Yee Yee and Staff Nurse Narissa have both attained the *Certification in Infection Control Liaison*, which was conferred by the Asia Pacific Infection Control Society last August.

RECOGNITION OF SERVICE EXCELLENCE

At Dover Park Hospice, we are dedicated to serving our patients and their caregivers with robust passion and care. As a mark of our service excellence, several of our colleagues and volunteers were awarded with accolades in recognition of their outstanding contribution in palliative care.

Our heartiest congratulations to Sister Yeoh Kim Choo, Nurse Manager from Inpatient Service, who received the *Ministry of Health (MOH) Nurses’ Merit Award 2021*, for her exceptional performance in the field. Five other nurses were awarded the *Community Care Manpower Development Awards 2021* to develop their career in the community care sector.

Medical Social Worker from Home Care, Michelle Lau, also clinched the *Promising Social Worker Award* given by President Halimah Yacob, for her exemplary work

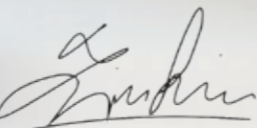
in making a difference to the lives of our patients, their caregivers, and the community. Additionally, volunteers from our pet-assisted activities were awarded with the *Singapore Patient Actions Award 2021* for their dedication in bringing comfort and cheer to our patients with pets.

30 YEARS AND BEYOND

This year, we celebrate our 30th anniversary which serves as a key milestone to commemorate our accomplishments through the years. The anniversary theme – “Making More Moments Matter” is a call to further our mission and touch more lives regardless of age, race or religion. We look forward to embark on new initiatives such as tele-monitoring using bio-sensors and the *Serving Leader Programme* where we empower our staff to live out our D’CARE values.

My deepest gratitude to all our staff, council members, volunteers and donors who have rode the storm with us. In particular, we thank our Myanmar nurses who bear much anxiety as political unrest at home continues to unfold through the media and chat groups, but remain committed to caring for our patients.

As we look forward to celebrate our 30th anniversary, it is my honour to serve alongside everyone at Dover Park Hospice. Let’s continue to Make More Moments Matter!

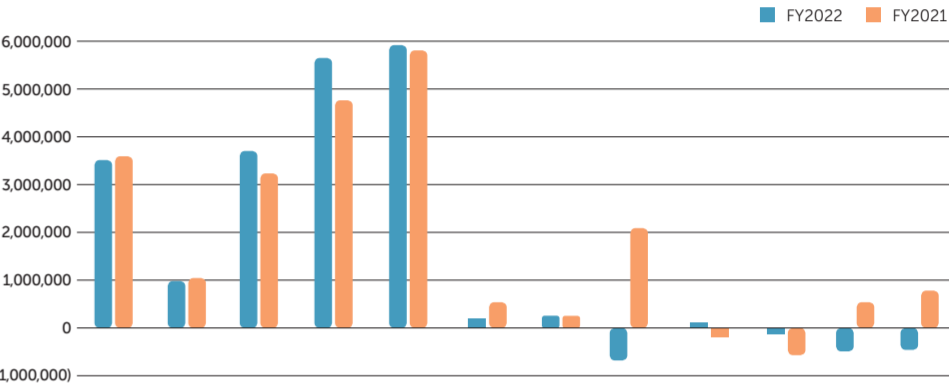


Timothy Liu
Chief Executive Officer

FY2021/22 Financial Highlights

Total Income for the Year

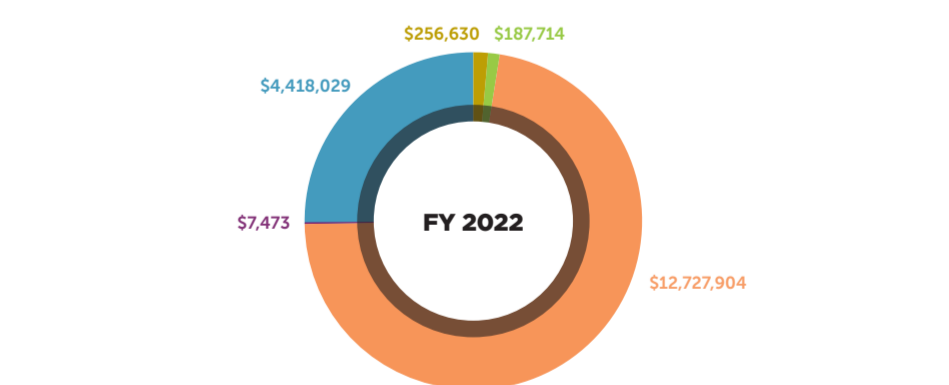
	FY 2022	FY 2021
Voluntary Income & Income from Fundraising Activities	3,495,074	3,586,930
Investment Income	964,947	1,037,184
Patients’ Fees	3,702,577	3,227,293
Government Subvention Grant	5,638,729	4,752,165
Other Grants	5,909,398	5,807,168
Amortisation of Deferred Capital Grants	170,555	517,153
Others	241,651	256,278
Fair Value (Losses)/Gains on Financial Assets at FVTPL - Investments	(662,759)	2,076,319
Fair Value Gains/(Losses) on Financial Assets at FVTPL - Forward Exchange Contracts	91,514	(194,824)
Unrealised Foreign Exchange Losses	(141,307)	(579,414)
Realised Foreign Exchange (Losses)/Gains	(517,166)	532,548
(Losses)/Gains on Disposal of Financial Assets	(449,573)	787,653
	18,443,640	21,806,453



	Voluntary Income & Income from Fundraising Activities	Investment Income	Patients’ Fees	Government Subvention Grant	Other Grants	Amortisation of Deferred Capital Grants	Others	Fair Value (Losses)/ Gains on Financial Assets at FVTPL - Investments	Fair Value (Losses)/ Gains on Financial Assets at FVTPL - Forward Exchange Contracts	Unrealised Foreign Exchange Losses	Realised Foreign Exchange (Losses)/ Gains	(Losses)/ Gains on Disposal of Financial Assets
FY 2022	3,495,074	964,947	3,702,577	5,638,729	5,909,398	170,555	241,651	(662,759)	91,514	(141,307)	(517,166)	(449,573)
FY 2021	3,586,930	1,037,184	3,227,293	4,752,165	5,807,168	517,153	256,278	2,076,319	(194,824)	(579,414)	532,548	787,653

Total Expenditure for the Year

	FY 2022	FY 2021
Fundraising Costs	256,630	133,072
Investment Management Expenses	187,714	167,013
Charitable Activities	12,727,904	11,043,449
Impairment Loss on/(Reversal of) trade receivables	7,473	(39,459)
Governance Activities	4,418,029	4,121,610
	17,597,750	15,425,685



Explanatory Notes

- Charitable activities**
Costs of charitable activities comprise all costs incurred in the pursuit of the charitable objects of the Hospice which is the provision of inpatient and home care services to the terminally ill. The total costs of charitable expenditure include an apportionment of support costs.
- Governance activities**
Governance activities comprise all costs attributable to the general running of the Hospice in providing the governance infrastructure and in ensuring public accountability. These costs include costs related to constitutional and statutory requirements, and include an apportionment of overhead and support costs.

The full set of audited financial statements can be downloaded from our website at www.doverpark.org.sg.



Scan this QR code for full FY2021-22 Financial Report.



Corporate Information

REGISTRATION

Dover Park Hospice ("DPH") is registered as a Social Service Agency (previously referred to as Voluntary Welfare Organisation) in accordance with the Societies Act 1966. The Hospice is registered as a charity under the Charities Act 1994. The Hospice is approved as an Institution of a Public Character (IPC) under the provisions of the Income Tax Act. The Hospice's tax-exempt status has been extended for 3 years from 1 October 2020 to 30 September 2023.

REGISTERED ADDRESS

10 Jalan Tan Tock Seng,
Singapore 308436

UNIQUE ENTITY NUMBER

S92SS0138D

AUDITORS

External Auditor: KPMG LLP
Internal Auditor: Deloitte & Touche
ERM Auditor (biennial): Deloitte & Touche

BANKER

DBS Bank Ltd

FUND MANAGER

UOB Asset Management Ltd

GOVERNING COUNCIL MEMBERS

Chairman of the 30th Governing Council
A/Prof Jeremy Lim

Vice Chairman of the 30th Governing Council & Chairman, Building & Development Committee
Ms Angelene Chan

Honorary Secretary

Prof Ho Yew Kee

Assistant Honorary Secretary

Ms Cheng Yoke Ping

Honorary Treasurer

Ms Diane Chen Dan

Assistant Honorary Treasurer

Ms Ong Ai Hua

Chairman, Audit, Risk & Governance Committee

Mr Low Chee Wah

Chairman, Communications & Outreach Committee

Mr Paul D. Gagnon

Co-Chairman, Fundraising Committee

Dr Kwa Chong Teck
Dr Karen Soh

Chairman, HR Committee

Ms Deanna Ong

Chairman, IT Committee

Mr Shee Gim Leng

Chairman, Investment Committee

Prof Ho Yew Kee

Chairman, Medical Professional Audit Committee

Adjunct A/Prof Mark Chan Peng Chew

Chairman, Volunteers Committee

Dr Tanya Tierney

Members

Mr Chey Chor Wai
Ms Marlene Foo (Deceased)
Dr Lionel Lee
Mr Henk R. De Glint
Ms Shefali Srinivas
Ms Woo E-Sah

Honorary Council Members

Dr Seet Ai Mee
Dr Jerry Lim

Property Trustees

Mr Robert Chew
Mr Chey Chor Wai

GENERAL DECLARATION

Nomination and Appointment of Council Members

All Council members were nominated and appointed to Council at the 29th Annual General Meeting held on 21 August 2021. All Council members declared that they are neither undischarged bankrupts nor have they been convicted of any offence in a court of law.

GOVERNANCE EVALUATION CHECKLIST

DPH falls under the Advanced Tier of Guidelines for purposes of the Code of Governance (Code) for Charities and Institutions of a Public Character as the Advanced Tier covers larger IPCs with gross annual receipts or total expenditure of \$10 million or more in each of its two immediate preceding financial years. DPH has complied with the relevant guidelines as stipulated in the Code. Full checklist can be obtained at the Charity Portal (www.charities.gov.sg).

CONFLICT OF INTERESTS

All Council members and staff of DPH are required to read, understand the conflict of interest policy in place and make full disclosure of any interests, relationships and holdings that could potentially result in a conflict of interest. When a conflict of interest, real or perceived arises, Council members/staff will not participate in decision making and approvals of transactions to which they have a conflict of interest.

PRIVACY POLICY

To ensure that personal information is secure, DPH enforces the Privacy and Security guidelines according to the Personal Data Protection (Amendment) Act 2020.

DPH takes precautions to safeguard personal information against loss, theft, misuse, as well as against unauthorised access, collection, use, disclosure, copying, modification, disposal, or similar risks. DPH imposes very strict sanction controls and only authorised staff on a need-to-know basis is given access to or will handle personal data. DPH provides regular training to all staff on this Policy and to keep them abreast of any new developments in privacy laws and regulations in Singapore.

Please visit DPH website at www.doverpark.org.sg for further details on the data protection policy.

Statement of Corporate Governance

Dover Park Hospice (DPH) as an Institution of a Public Character (IPC) is committed to good governance and management practices as it seeks to comply with the Charity and IPC regulations and Code of Governance for Charities and Institutions of a Public Character (Code). The Council takes the view that it is in the best interest of DPH to practise a high standard of corporate governance. DPH is also committed to improving its governance and management practices as a responsible IPC. DPH falls under the Advanced Tier of Guidelines for the purposes of the Code.

1. THE GOVERNING COUNCIL

1.1 Council Governance

The Council of DPH is the Board and its primary role is to ensure compliance with DPH's Constitution and all relevant laws and regulations. The Council ensures that DPH is well run and continues to operate in an effective, credible and sustainable manner. Its primary responsibility is to promote the long term interest of DPH in accordance with its mission.

1.2 The Council's roles and responsibilities include:

1. Overseeing the mission and strategy development process.
2. Ensuring compliance with all regulations pertaining to good governance.
3. Accounts for DPH's performance so that the efforts and resources deliver the desired outcome and benefits to the patients, their families and the community that DPH serves.
4. Monitoring the prudent use of funds and to ensure financial sustainability of DPH in the long term.
5. Evaluating the performance of top management.
6. Devising and soliciting philanthropic giving.

2. COUNCIL COMPOSITION AND MEMBERSHIP

1. The Council comprises of 2 Honorary Council members and 20 Council members. No staff members sit in the Council.
2. In recognition of the Founding members' contributions to DPH, the 2 Honorary Council members need not have to stand for election at General Meetings. They are allowed to attend all meetings but they do not have any voting rights.
3. The Council Chairman ensures that the Council consists of individuals with the relevant complementary core competencies so that they are able to bring to Council a degree of diversity, viewpoints, expertise and experiences.
4. All Council members are required to declare their conflict of interest at the earliest opportunity.
5. All Council members are volunteers and are not remunerated for their services at DPH.
6. The Council ensures that there is a good balance between continuity, renewal and compliance with regulatory requirements.
7. There is a formalised process for the appointment/re-appointment of Council members.
8. Council members are required to perform an annual self-evaluation to assess the Council's performance and effectiveness.
9. All Council members are elected at DPH's Annual General Meeting to be held in August. They are required to stand in for re-election at least once every 2 years.

10. Under the Constitution of DPH, no Council members shall serve more than 6 consecutive years. However, they may be re-nominated after a break of at least one year.
11. The Honorary Treasurer and Assistant Honorary Treasurer have a 2-year term. They may be re-appointed to that position after a break of one year.

3. CHAIRMAN AND CHIEF EXECUTIVE OFFICER (CEO)

1. The roles of the Chairman and CEO are separate and their responsibilities are defined to ensure a balance of power and authority within DPH.
2. The Chairman manages the governance of the Council and the sub-committees to set the strategic direction, vision and mission of DPH.
3. The Chairman approves the agenda for Council meetings and exercises control over the quality, quantity and timeliness of information flow between the Council and management.
4. The CEO manages the business of DPH and implements the Council's decisions. The CEO is assisted by a management team.

4. COUNCIL'S EVALUATION

1. The Council has implemented Council's Evaluation on Governance since 2016 to examine the Council's performance and find ways to improve its effectiveness. The self-assessment questionnaire provides the Council the opportunity to self-reflect and provide necessary feedback for improvements.

5. ENTERPRISE RISK MANAGEMENT (ERM)

1. The Council appoints the Audit, Risk and Governance Committee (ARGC) to oversee the risk management. The ARGC reviews the overall adequacy and effectiveness of risk management and internal control systems.
2. The Management is responsible for the effective implementation of risk management strategies, policies and processes to facilitate the achievement of DPH's operational and strategic objectives. Key risks are identified, addressed and reviewed on an ongoing basis and mitigated risks where possible.
3. The CEO will report to the ARGC on the progress of the ERM on a periodic basis. Thereafter, the ARGC will report to the Council.

6. COUNCIL MEETINGS

1. The Council meets quarterly during the work year that starts from August to July of each year. The Council has met on the following dates:
 - 21 August 2021
 - 23 November 2021
 - 22 March 2022
 - 26 July 2022

The Council members' attendance at the Council meetings for the period of August 2021 to July 2022 are as follow:

S/No	Name of Council Members	No of Meetings in the work year	No of Meetings attended
1.	A/Prof Jeremy Lim	4	3
2.	Ms Angelene Chan	4	3
3.	Prof Ho Yew Kee	4	4
4.	Ms Cheng Yoke Ping	4	3
5.	Ms Diane Chen Dan	4	2
6.	Ms Ong Ai Hua	4	3

S/No	Name of Council Members	No of Meetings in the work year	No of Meetings attended
7.	Mr Low Chee Wah	4	2
8.	Mr Paul D. Gagnon	4	3
9.	Dr Kwa Chong Teck	4	4
10.	Dr Karen Soh	4	1
11.	Ms Deanna Ong	4	3
12.	Mr Shee Gim Leng	4	4
13.	Adjunct A/Prof Mark Chan Peng Chew	4	4
14.	Dr Tanya Tierney	4	4
15.	Mr Chey Chor Wai	4	4
16.	Ms Marlene Foo (Deceased)	4	-
17.	Dr Lionel Lee	4	3
18.	Mr Henk R. De Glint	4	4
19.	Ms Shefali Srinivas	4	3
20.	Ms Woo E-Sah	4	1

2. In view of Covid-19 and safe distancing measures, Council meetings were held via video conferencing.

Roles and Responsibilities of Sub-committees

7. AUDIT, RISK AND GOVERNANCE COMMITTEE (ARGC)

1. The ARGC is established to provide audit oversight by reviewing the quality, timeliness and effectiveness of the hospice's financial reporting process, internal controls, internal and external audit, risk environment and governance.
2. KPMG LLP was appointed as the external auditor whereas Deloitte and Touche was appointed as the internal auditor as well as the ERM auditor. These auditors report directly to the ARGC.
3. Audit partners in charge of DPH are changed every five years.
4. The ARGC meets at least 3 times a year.

8. APPOINTMENT AND NOMINATION COMMITTEE (ANC)

1. The ANC is responsible for evaluating suitable candidates for DPH's Council as well as the sub-committees under the Council.
2. To ensure that new Council members have sufficient knowledge about palliative care, the CEO provides an induction programme to all new Council members. Suitable courses from the National Council of Social Services (NCSS) on Governance are forwarded to Council members for their participation as deemed necessary.
3. The ANC meets at least once a year.

9. BUILDING AND DEVELOPMENT COMMITTEE (BDC)

1. The BDC obtains user requirements from the various hospice stakeholders for endorsement by EXCO and Council before submitting to the Hospital Planning Committee (HPC).
2. The BDC works with HPC on user requirements, legal arrangements, costs and funding matters and inputs from EXCO and Council for inclusion in the Building Design Brief for DPH at the Integrated Care Hub (ICH).
3. The BDC liaises with the building consultant and contractor(s) on the Building Design Brief and monitors the progress of the building project and timeline.
4. The BDC meets at least 4 times a year.

10. COMMUNICATIONS AND OUTREACH COMMITTEE (COC)

1. The COC oversees, builds and strengthens DPH's current branding and communication policies, protocols and guidelines.
2. The COC provides insight and counsel on the communications strategies that support the achievement of the communications and outreach objectives with respect to enhancing the presence of DPH in all media platforms (traditional and digital media), and align with the corporate mission and vision.
3. The COC meets at least 4 times a year.

11. EXECUTIVE COMMITTEE (EXCO)

1. The EXCO oversees the operations of DPH.
2. Both the CEO and Medical Director report to the EXCO and update them on the operations and development of DPH.
3. The EXCO reviews and approves all matters such as annual budget, strategies and policies before they are tabled for Council's approval.
4. The EXCO meets at least 6 times a year.

12. FUNDRAISING COMMITTEE (FRC)

1. The FRC provides strategic directions for fundraising in ensuring that all fundraising activities comply with regulatory requirements.
2. The FRC also provides guidance to the management in hosting major events such as Charity Golf and Gala Dinner.
3. The FRC meets up to 5 times a year.

13. HUMAN RESOURCES COMMITTEE (HRC)

1. The HRC is responsible for establishing the Human Resource policies, manpower needs and practices of DPH so that they are in line with the vision and mission of DPH.
2. The HRC recommends and sets remuneration of key staff to be approved by the Council.
3. The HRC meets at least 4 times a year.

14. INFORMATION TECHNOLOGY COMMITTEE (ITC)

1. The ITC formulates and drives the implementation of an integrated Information and Technology Strategy which will be consistent with and supporting the national Information Technology (IT) efforts led by MOH Holdings.
2. The ITC helps DPH to leverage IT in enhancing various aspects of its operations such as patients' records and management, knowledge management and other areas that IT may determine as useful.
3. The ITC meets at least 4 times a year.

15. INVESTMENT COMMITTEE (IC)

1. The IC sets the objectives, strategies and policies on the management of investments. They oversee DPH's investible funds.
2. An Investment Policy Statement (IPS) governs the management of the investible funds and it is approved by the Council upon recommendation by IC.
3. The IC ensures that the Fund Manager manages the DPH investible funds in accordance with the IPS.
4. The IC meets at least 4 times a year.

16. MEDICAL PROFESSIONAL AUDIT COMMITTEE (MPAC)

1. The MPAC oversees the quality and assurance of the professional medical and nursing services provided by DPH.
2. The MPAC monitors the clinical quality and governance to ensure proper policies and procedures are in place to provide the highest standard of patient care.
3. The MPAC also encourages clinical research, in-house research proposals and monitors the research activity.
4. The MPAC meets at least 4 times a year.

17. VOLUNTEERS COMMITTEE (VC)

1. The VC ensures that volunteers activities meet the vision and mission of DPH so as to benefit both the patients and DPH.
2. The VC meets at least 4 times a year.

18. WHISTLE-BLOWING POLICY

1. DPH has a whistle-blowing policy to allow staff, suppliers, contractors, partners and other stakeholders to raise concerns or report malpractices and misconducts to the Chairman of the Audit, Risk and Governance Committee. The policy aims to encourage the reporting of such matters in good faith, with the confidence that persons making such reports will be treated fairly and with due follow-up action. All whistle-blower reports, including the identity of the whistle-blower will be treated with confidentiality. There is no known whistle-blower report in the financial year ended 31 March 2022.

19. RESERVE POLICY

1. The Council has established a reserve policy for DPH by using the unrestricted net liquid assets available to meet expenditure obligations as a reserve measurement. This policy is disclosed in the Audited Financial Statements under Capital Management.

20. DISCLOSURE AND TRANSPARENCY

1. The Annual report is prepared to include information on its programmes, financial, governance, Council and the Management.
2. Audited Financial Statements are available on DPH website and information on DPH's financials can also be found in the Commissioner of Charities website.
3. For the financial year ended 31 March 2022, Council members were not remunerated for their services to the Hospice. There is no staff serving as Council members.
4. The annual remuneration of the Hospice's three highest paid staff is disclosed in the bands of \$100,000 are as follows:

Remuneration Bands	FY 2022	FY 2021
\$100,001 to \$200,000	-	-
\$200,001 to \$300,000	2	3
\$300,001 to \$400,000	1	-

5. There is no paid staff who is a close member of the family of the Chief Executive Officer or Council members receiving more than \$50,000 in remuneration during the financial year.
6. In the financial year ended 31 March 2022, the Hospice did not make any loan or grant to any third parties.



Making Every Moment Matter

OVER
262800
HOURS

Treating our patients with respect and preserving dignity till the very end

Governance Evaluation Checklist

Advanced Tier

S/N	Code guideline	Code ID	Response
Board Governance			
1.	Induction and orientation are provided to incoming governing board members upon joining the Board.	1.1.2	Complied
Are there governing board members holding staff¹ appointments? (skip items 2 and 3 if "No")			No
2.	Staff does not chair the Board and does not comprise more than one third of the Board.	1.1.3	NA
3.	There are written job descriptions for the staff's executive functions and operational duties, which are distinct from the staff's Board role.	1.1.5	NA
4.	The Treasurer of the charity (or any person holding an equivalent position in the charity, e.g. Finance Committee Chairman or a governing board member responsible for overseeing the finances of the charity) can only serve a maximum of 4 consecutive years .	1.1.7	Complied
If the charity has not appointed any governing board member to oversee its finances, it will be presumed that the Chairman oversees the finances of the charity.			
5.	All governing board members must submit themselves for re- nomination and re-appointment , at least once every 3 years.	1.1.8	Complied
6.	The Board conducts self evaluation to assess its performance and effectiveness once during its term or every 3 years, whichever is shorter.	1.1.12	Complied
Is there any governing board member who has served for more than 10 consecutive years? (skip item 7 if "No")			No
7.	The charity discloses in its annual report the reasons for retaining the governing board member who has served for more than 10 consecutive years .	1.1.13	NA
8.	There are documented terms of reference for the Board and each of its committees.	1.2.1	Complied
Conflict of Interest			
9.	There are documented procedures for governing board members and staff to declare actual or potential conflicts of interest to the Board at the earliest opportunity.	2.1	Complied
10.	Governing board members do not vote or participate in decision making on matters where they have a conflict of interest.	2.4	Complied
Strategic Planning			
11.	The Board periodically reviews and approves the strategic plan for the charity to ensure that the charity's activities are in line with the charity's objectives.	3.2.2	Complied
12.	There is a documented plan to develop the capacity and capability of the charity and the Board monitors the progress of the plan.	3.2.4	Complied

S/N	Code guideline	Code ID	Response
Human Resource and Volunteer ² Management			
13.	The Board approves documented human resource policies for staff.	5.1	Complied
14.	There is a documented Code of Conduct for governing board members, staff and volunteers (where applicable) which is approved by the Board.	5.3	Complied
15.	There are processes for regular supervision, appraisal and professional development of staff.	5.5	Complied
Are there volunteers serving in the charity? (skip item 16 if "No")			Yes
16.	There are volunteer management policies in place for volunteers.	5.7	Complied
Financial Management and Internal Controls			
17.	There is a documented policy to seek the Board's approval for any loans, donations, grants or financial assistance provided by the charity which are not part of the charity's core charitable programmes.	6.1.1	NA
18.	The Board ensures that internal controls for financial matters in key areas are in place with documented procedures .	6.1.2	Complied
19.	The Board ensures that reviews on the charity's internal controls, processes, key programmes and events are regularly conducted.	6.1.3	Complied
20.	The Board ensures that there is a process to identify, and regularly monitor and review the charity's key risks .	6.1.4	Complied
21.	The Board approves an annual budget for the charity's plans and regularly monitors the charity's expenditure.	6.2.1	Complied
Does the charity invest its reserves, including fixed deposits? (Skip item 22 if "No")			Yes
22.	The charity has a documented investment policy approved by the Board.	6.4.3	Complied
Fundraising Practices			
Did the charity receive cash donations (solicited or unsolicited) during the financial year? (skip item 23 if "No")			Yes
23.	All collections received (solicited or unsolicited) are properly accounted for and promptly deposited by the charity.	7.2.2	Complied
Did the charity receive donations in kind during the financial year? (skip item 24 if "No")			Yes
24.	All donations in kind received are properly recorded and accounted for by the charity.	7.2.3	Complied
Disclosure and Transparency			
25.	The charity discloses in its annual report – (a) the number of Board meetings in the financial year; and (b) the attendance of every governing board member at those meetings.	8.2	Complied
Are governing board members remunerated for their services to the Board? (skip items 26 and 27 if "No")			No
26.	No governing board member is involved in setting his own remuneration.	2.2	NA
27.	The charity discloses the exact remuneration and benefits received by each governing board member in its annual report. OR The charity discloses that no governing board member is remunerated.	8.3	NA

Our Committees

Dover Park Hospice's Committees

1. APPOINTMENT AND NOMINATION COMMITTEE

- A/Prof Jeremy Lim (Chairman)
- Ms Angelene Chan
- Prof Ho Yew Kee

2. AUDIT, RISK AND GOVERNANCE COMMITTEE

- Mr Low Chee Wah (Chairman)
- Prof Ho Yew Kee (Vice Chairman)
- Mr Tham Chee Soon
- Mr Wilson Tan
- Mr Gerry Chng

3. BUILDING AND DEVELOPMENT COMMITTEE

- Ms Angelene Chan (Chairman)
- Dr Lionel Lee (Vice Chairman)
- Mr Loh Hai Yew
- Mr Kenneth Sim
- Dr Wu Huei Yaw
- Mr Timothy Liu (Management)
- Dr Mervyn Koh (Management)
- Mr Kenneth Chan (Management - Last Day of Service: 2 March 2022)
- Mr Manmhon Singh (Management - Date of Appointment: 4 May 2022)

4. COMMUNICATIONS AND OUTREACH COMMITTEE

- Mr Paul D. Gagnon (Chairman)
- Ms Shefali Srinivas (Vice Chairman)
- Mr Lester Lee
- Ms Ai Ling Sim-Devadas
- Mr Andy Seet
- Mr Jack Ang
- Mr Alfred Low
- Mr Danny Yeo
- Ms Genevieve Kuek
- Ms Manisha Tank
- Ms Siti Rohanah Binte Mohamad Koid
- Dr Tanya Tierney
- Ms Suzanne Lim

5. EXECUTIVE COMMITTEE

- A/Prof Jeremy Lim (Chairman)
- Ms Angelene Chan (Vice Chairman)
- Prof Ho Yew Kee (Honorary Secretary)
- Ms Cheng Yoke Ping (Assistant Hon Secretary)
- Ms Diane Chen Dan (Honorary Treasurer)
- Ms Ong Ai Hua (Assistant Honorary Treasurer)

6. FUNDRAISING COMMITTEE

- Dr Kwa Chong Teck (Co-Chairman)
- Dr Karen Soh (Co-Chairman)
- Dr June Goh
- Ms Joy Tan
- Mr Kenneth Tan
- Ms Shan Tjio
- Ms Shauna Teo
- Ms Tiffany Varinata
- Mr Johnny Lam
- Mr Alex Tan Tiong Huat
- Ms Lim Hon Ing (Appointed on 17 November 2021)

7. HUMAN RESOURCE COMMITTEE

- Ms Deanna Ong (Chairman)
- Dr Kwa Chong Teck (Vice Chairman)
- Mr Anthony Chee
- Mr Robert Chew
- Mr Robert Goh
- Ms Ong Ai Hua
- Dr Seet Ju Ee

8. INFORMATION TECHNOLOGY COMMITTEE

- Mr Shee Gim Leng (Chairman)
- Mr Paul D. Gagnon
- Mr Lester Lee
- Col (Retired) Rupert Gwee
- Mr Ying Shao Wei

9. INVESTMENT COMMITTEE

- Prof Ho Yew Kee (Chairman)
- Mr Guan Ong (Vice Chairman)
- Mr Freddy Orchard
- Mr Ho Hin Wah
- Mr Joel Cheng
- Ms Lissa Toh

Endowment Fund Trustees

- Ms Jacqueline Khoo
- Dr Seet Ai Mee
- Prof Tay Boon Keng

10. MEDICAL PROFESSIONAL AUDIT COMMITTEE

- Adjunct A/Prof Mark Chan Peng Chew (Chairman)
- Dr Angel Lee (Vice Chairman)
- Dr Gilbert Fan
- Dr Robert Lim
- Dr Tiew Lay Hwa
- Dr Uma Rajan
- Dr Wu Huei Yaw
- Mr Wu Tuck Seng
- Mrs Nellie Yeo
- Dr Alan Ong
- Dr Kwa Chong Teck

11. MEDIFUND COMMITTEE (APPOINTED BY MOH)

- Prof Ho Yew Kee (Chairman)
- Dr Ian Leong
- Ms Jenny Bong

The Medifund Committee was appointed by MOH for a tenure of 4 years from 1 April 2021 to 31 March 2025.

12. VOLUNTEERS COMMITTEE

- Dr Tanya Tierney (Chairman)
- Ms Jacqueline Khoo
- Mr Muhammad Agus Bin Othman
- Ms Janice Phua
- Mr Gilbert Lew
- Mr Sia Ooi Kong
- Ms Chan Choo Lin
- Ms Ler Yu-Min
- Mrs Pearl Lim
- Mr Bernard Yeo
- Ms Linda Hart
- Ms Cheah Li Yean
- Ms Yeo Tze Yee
- Ms Lim Guek Har
- Mr Kelvin Fong
- Ms Yeo Jing Ping

Our Management

CHIEF EXECUTIVE OFFICER

Mr Timothy Liu
(Date of Appointment: 7 March 2016)

MEDICAL DIRECTOR

Dr Mervyn Koh

SENIOR CONSULTANT

Dr Allyn Hum
Dr Joseph Ong Yew Jin

CONSULTANT

Dr Yee Choon Meng

PRINCIPAL RESIDENT PHYSICIAN

Dr Yea Kok Chin

SENIOR RESIDENT PHYSICIAN

Dr Martin Lee

RESIDENT PHYSICIANS

Dr Hoh Sek Yew
Dr Chia T-Yunn
Dr Drusilla Teo
(Date of Appointment: 4 October 2021)

DIRECTOR OF NURSING

Ms Chin Soh Mun

HEAD, SOCIAL WORK AND PSYCHOSOCIAL SERVICES

Ms Martha Ng

MANAGER, FINANCE, ADMIN AND PATIENT SERVICES

Ms Karen Tan

MANAGER, COMMUNICATIONS AND OUTREACH

Ms Jenny Goo

MANAGER, FUNDRAISING

Mr Alex Ho

MANAGER, INFORMATION TECHNOLOGY

Mr Kwok Wing Kit
(Last Day of Service: 27 March 2022)
Mr Tan Chong Boon
(Date of Appointment: 7 April 2022)

MANAGER, HUMAN RESOURCE

Ms Teresa Tang

MANAGER, VOLUNTEER PROGRAMME

Ms Tok Shou Wee

MANAGER, OPERATIONS AND FACILITIES

Mr Kenneth Chan
(Last Day of Service: 2 March 2022)
Mr Manmhon Singh
(Date of Appointment: 4 May 2022)

MANAGER, TRAINING

Ms Tan Li Kuan

STAFF-IN-CHARGE, RESEARCH

Ms Tay Ri Yin

Notes:

- Staff: Paid or unpaid individuals who are involved in the day-to-day operations of the charity, e.g. an Executive Director or Administrative personnel.
- Volunteer: Persons who willingly give up time for charitable purposes, without expectation of any remuneration. For volunteers who are involved in the day-to-day operations of the charity, they should also abide by the best practices set out in the Code applicable to 'staff'.
- Close member of the family: Those family members who may be expected to influence, or be influenced by, that person in their dealings with the charity. In most cases, they would include:
 - That person's children and spouse;
 - Children of that person's spouse; and
 - Dependants of that person or that person's spouse.