

THE HOSPICE

LINK

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Integrated care hub

Green hospital

Home away
from home

COMMUNITY-BASED CARE CENTRES AND HOME

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A space to care

There was a time in the history of Singapore hospice movement when getting a space to care for the chronically ill and dying was difficult. It wasn't so long ago, in the 1990s, when the plan to build Dover Park Hospice was faced with opposition and rejection. When the plans were first released, members of the public who worked in the vicinity raised opposition for being in such close proximity to the dying.

But the Singapore hospice movement would not be deterred by NIMBY (not-in-my-own-backyard) attitude. Instead, it picked up momentum in public education and training. The space to care began to expand with more organisations and institutions joining in to walk the final journeys with those who had life-threatening illnesses.

Early this year, Assisi Hospice and St Joseph's Home moved into bigger and better premises. In the next few years, Dover Park Hospice will be moving into new facilities that will double its capacity to care for its patients. 2017 also sees the Singapore Cancer Society commemorating 30 years of providing care in a home setting, reminding us that the home is an important space to patients.

Yet, more physical space does not automatically translate into good quality of care. We have to keep space in our hearts and minds to offer to those who are unwell and in need of palliative care. Join us in this movement!

Ms Yeo Tan Tan
Chief Executive
Singapore Hospice Council

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Dover Park Hospice expansion by 2022

Hospice's new facility will double its capacity, provide better integrated care and a more home-like surrounding for patients.

When Dover Park Hospice (DPH) moves into the Integrated Care Hub (ICH), in HealthCity Novena in 2022, it will bring family-friendly care and comfort to even more terminally-ill patients.

Working closely with Tan Tock Seng Hospital (TTSH) and the National Healthcare Group (NHG), DPH will provide integrated palliative care for these patients. The new DPH facility will have 100 beds, double its current size of 50 at 10 Jalan Tan Tock Seng. It will also have a Day Care Centre.

To help the terminally-ill patients live in comfort and dignity, DPH's new 4-storey facility in ICH, set within HealthCity Novena, is designed to be more home-like, with more family spaces

in serene surroundings so that patients can spend meaningful moments with their families.

Providing family-friendly care has always been part of DPH's philosophy of care. Besides taking care of patients' pain, discomfort, and other symptoms, psycho-social care is equally important.

Mr. Timothy Liu, DPH's Chief Executive Officer, said: "Hospice care is not just about addressing our patients' physical pain and symptoms; we also help them and their families address their emotional, psychological, and social challenges. As a charity, we also help our patients with financial challenges to pay for their hospice care. The ICH marks not just a physical expansion of our facilities, but a new journey in providing even better, more holistic care for our patients and their loved ones."



Moving to the new facility in ICH, which has more space, will enable DPH to make care more family-friendly by including:


- A roof top garden, sensory wall, horticulture and sand therapy enclaves for family time;
- More space for family and dining activities, quiet times, and counselling rooms; and
- Day Activity Centre for Hospice Day Care.

Left and top: Artist's impressions of the new DPH. Above: Senior Minister of State Amy Khor at the DPH ground-breaking ceremony.

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The new facility will be physically linked to TTSH, which will enable both DPH and TTSH to better integrate the care and operational processes. This allows easy transfer of patients between the institutions and more convenient access for DPH patients to go for their follow-up appointments without the need of an ambulance.

Construction work on the new Dover Park Hospice started with the ground-breaking for ICH on 21 March 2017.

DPH, established in 1992 as Singapore's first purpose-built inpatient hospice, provides quality Hospice and End-of-Life/ Palliative Care to terminally-ill patients. It is open to all regardless of race, religion, or income. It also strongly believes that patients should live their last days in comfort and dignity, while surrounded by their loved ones. It also believes in holistic care and continual support that extends to patients' families, as they help their loved ones complete the final phase of their life journeys. 



Singapore Cancer Society Rehabilitation Centre

Singapore's first community-based cancer rehabilitation centre aims to be a one-stop centre providing integrated and holistic care for cancer patients.

On 8 October 2016, Minister for Health, Mr Gan Kim Yong, officially opened the Singapore Cancer Society (SCS) Rehabilitation Centre, Singapore's first community-based cancer rehabilitation centre.

The SCS Rehabilitation Centre is a one-stop centre that provides integrated, holistic rehabilitative services for cancer patients and survivors. The Centre provides continuing care that is complementary to existing rehabilitative services offered at acute medical hospitals.

Located at JEM Office Tower in Jurong East, the facility offers cancer patients and survivors convenient access to a full suite of

integrated and holistic rehabilitative services, including rehabilitation with therapists, psychosocial counsellors, physician support, and peer support groups.

The SCS Rehabilitation Centre adopts a person-centred approach in developing customised cancer care plans. This is achieved through the personalised attention given to clients by the Cancer Care Navigators (CCN) — a key component in SCS model of care — who help clients access relevant services seamlessly and better cater to each individual's needs. The rehab clients' progress is monitored by the SCS rehabilitation team of therapists, CCNs, social workers and counsellors.




Clockwise from far left: The doors of SCS Cancer Rehabilitation Centre were opened on 8 October 2016; the state-of-the-art gym at the SCS Cancer Rehabilitation Centre features specialised fitness equipment for cancer patients and survivors; Health Minister, Gan Kim Yong (centre in grey shirt), and SCS staff at the Community Healing Garden.

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Another important group that the Centre caters to is the caregivers. There are training programmes for caregivers to equip them with the knowledge and skills that will help them in their caregiving journey for their loved ones.

Through various physical, nutritional and psychosocial programmes, the SCS Rehabilitation Centre offers its clients the essential support needed to overcome fatigue, weakness, nutritional, emotional and psychological challenges brought on by the disease. Nutrition counselling, enrichment workshops, music and art therapy, and social activities are among the myriad of activities available for these SCS rehab members. 

Singapore Cancer Society celebrates 30 years of home hospice care

Hospice Care Group of Singapore Cancer Society, the first hospice home care service in Singapore, was founded in 1987. Since then, its team has walked with numerous cancer patients and their families to the end. This is the story of the SCS home hospice care.

THE BEGINNINGS OF THE HOSPICE MOVEMENT

In 1986, an article on the work of St Joseph's Home in Jurong with the terminally-ill and their families inspired a group of volunteers to come together to form the Palliative Care Co-ordinating Group (PCCG).

In December 1986, the PCCG approached the Singapore Cancer Society's Helping Hands Committee, then chaired by Dr Wong Sen Chow, to consider a joint approach to terminal care. At that time, the SCS Helping Hands Committee comprised the SCS New Voice Club (post-laryngectomy cancer survivors) and the Listeners' Group (nurses providing para-counselling).

With the blessing of the Ministry of Health, SCS included PCCG into SCS programmes under the purview of the Helping Hands Committee. The PCCG called themselves the Hospice Care Group (HCG) of the SCS.

The objectives of the Group were:

- To help dying patients and their families with special emphasis on pain control;
- To coordinate home care and inpatient care; and
- To organise training for doctors, nurses and other volunteers in palliative care and counseling.

In 1987, HCG's volunteers — nurses, doctors, and lay people — visited a total of 42 patients at their homes. The team also actively provided voluntary services at All Saints Home and St Joseph's Home.

By this time, there was an increasing interest in providing care for terminally ill patients in Singapore. At a meeting with Dr Ee Peng Liang, then President of Community Chest, and representatives of organisations involved with hospice work, it was concluded that the Hospice Care Group of SCS will aim to be a catalyst in furthering the activities of hospice care in Singapore.



The HCG received donations from the British Association of Singapore (Ladies Group), Reuben Meyer Trust Fund, and the Loke Cheng-Kim Foundation. The donation from the Loke Cheng-Kim Foundation was the most significant as it was the first one specifically for hospice care in Singapore.

The donation provided the salary of a nurse coordinator for three years and funds for overseas training. Chua Lee Kiang became the first nurse coordinator HCG hired in 1988 to deal with the increasing number of requests for information and assistance in hospice care, and to coordinate the involvement of nurse volunteers.

SCS sponsored Nurse Chua Lee Kiang and volunteer Nursing Officer Teo Her Tee to Perth for a 3-month course on Professional Studies in Hospice Palliative Care. It was on this trip that contact was first made with Dr Rosalie Shaw who was instrumental in the further development of the hospice movement in Singapore.

In addition to providing care and support for terminally-ill cancer patients and their families, HCG also held monthly conferences for its team of volunteers, sent staff to courses, and invited foreign experts to speak on various topics.

In October 1989, HCG and SCS organised the first regional conference on hospice care. Speakers included Dr Mary Baines, Mrs Prue Clench (MBE), Dr Sheila Cassidy, Dr Rosalie Shaw and Dr Fumikazu Takeda.

The conference inspired the start of hospice care in Malaysia by the National Cancer Society of Malaysia (Penang Branch) under the leadership of Dato' John Cardosa and Dato' Seri Dr T Devaraj.

This conference also resulted in the 2nd Asia Pacific Hospice Conference held in Singapore in 1996, under the auspices of the Singapore Hospice Council (SHC), and the subsequent formation of the Asia Pacific Hospice Palliative Care Network.


THE ESTABLISHMENT OF THE INDEPENDENT HOSPICES

By 1989, members of the HCG felt that an independent organisation to champion hospice care was needed in Singapore. Under the leadership of Dr Cynthia Goh and Dr Anne Merriman, and

with the full support of the SCS, a number of hospice volunteers left to form the Hospice Care Association (HCA), an independent charitable organisation devoted to the promotion of hospice care in Singapore.

The SCS Council allowed the remaining funds donated by the Loke Cheng-Kim Foundation, together with the position of the nurse coordinator, to be given to the new organisation. The HCA was registered as a society under the Registry of Societies on 4 December 1989, and started functioning as a separate entity funded by the Community Chest from 1 January 1990.

SCS HOSPICE CARE

Since the Hospice Care Group was founded in 1987, the team has provided home hospice care to support the needs of the Singapore community. SCS Hospice Care, as the team is now known, is one of the founding members of the Singapore Hospice Council. Its hospice care services have been increasing in both capacity and capability to better cope with growing needs. The team applies a multi-disciplinary approach to ensure that both patients' and their family members needs are appropriately assessed and addressed. 

SCS home hospice care in 2016



5,394

Total number of visits made to patients

125

Average daily patient load

332

New referrals

58.42%

Patients referred for psychosocial support

505

Patients served

18.42%

Patients referred for home rehabilitation

TREATMENTS AND SERVICES:

• Clinical Assessment and Treatment

SCS professionals assess the needs of patients, their caregivers, and their families, providing help in managing symptoms like pain, as well as teach caregivers how to care for their loved ones.

• Psychosocial Services (PSS)

Patients and their caregivers receive financial assistance, psychosocial and emotional support. PSS also offers bereavement support to family members and caregivers in months following the death of a patient.

• Home Rehabilitation

SCS therapists assess and train patients and their caregivers on exercises aimed at maintaining their function in day to day activities.

• Loan of Equipment

SCS loan equipment such as oxygen concentrators and syringe drivers as well as rehabilitation equipment such as wheelchairs, commodes and walking aids to patients.

• Welfare Aid

Eligible patients receive monthly aid for daily needs and medical supplies as recommended by their medical team.

• Living-Well Programme

SCS enhances the dignity of care and quality living for financially needy patients by enabling them to reside in their homes until their last days, by fulfilling last wishes and enabling legacy building.

Beyond the call of duty

Agape Methodist Hospice provides palliative care for patients with advance illness in the comfort of their own home all around Singapore.



Left: Nurse Moira at work. An AMH nurse pays a visit to her patient.

Mr Lim had been living alone for the past seven years since his parents passed away. The former delivery man, who is single, had stopped working after sustaining a back fracture in May 2016. He was admitted to Changi General Hospital (CGH) where doctors discovered that he had lung cancer which had spread to his spine.

As it was too late for any treatments, the doctors discharged Mr Lim in July 2016 to be cared for at home. He was referred to Agape Methodist Hospice (AMH), a home-based palliative care programme run by Methodist Welfare Services, for pain and symptom control as well as home personal care.

When AMH Nurse Manager Moira Tan visited Mr Lim for the first time, she found him extremely weak and frail. He was managing on his own, moving slowly around his HDB flat with a walking frame. He even pushed her away when she tried to help him to the bathroom.

Mr Lim's stubbornness did not surprise his brother, the only family member who visited him when he fell sick. His obstinacy had estranged him from his other siblings. He also turned down help from other welfare services, from meal delivery to home assistance.


Despite Mr Lim's refusal to co-operate, Nurse Moira was not discouraged. She continued to visit him twice a week. Moved by her persistence, he began to accept the kindness and care shown towards him.

Due to his forgetfulness, he had missed out collecting his medications after hospital visits. Nurse Moira bought him a special pillbox with Chinese characters, and replenished the pills before they ran out. She also rallied his neighbours to buy lunch and dinner for him when he found it to be physically painful to move around.

In caring for Mr Lim, the AMH team went beyond medical and nursing care. They stepped in when his television and refrigerator broke down, arranging for a second-hand television set to be delivered, and the refrigerator to be repaired.

Mr Lim expressed his appreciation for the AMH staff by buying food for them from the nearby coffee shop.

Towards end 2016, Mr Lim's condition deteriorated rapidly. When he lost bowel control, Nurse Moira was there to clean his flat of urine and faeces, and she also provided him with a set of clean cushion covers. Mr Lim passed away in December 2016.

Nurse Moira was comforted that Mr Lim was able to spend his last days in comfort and dignity under AMH's care. "He died peacefully, this is what we work and hope for our patients. My satisfaction comes from being able to give holistic care to patients during their last journey," she said. 

If you'd like to volunteer with AMH, please go to mws.sg or email ce@mws.sg

Assisi Hospice new care programmes

Assisi Hospice's new premises on Thomson Road features a dedicated dementia ward and new care programmes for patients and caregivers.

Ninety-eight-year old Madam Chan Lim Seng has been warded in Assisi Hospice since January 2017 for advanced dementia. Throughout her stay, she received care that is unique to her circumstances — inpatient clinical care to help manage her dementia symptoms and occupational therapy to maintain her motor skills. She has a room to herself because she is wary of strangers. Despite being away from home, she is accompanied by familiar things.

Such arrangements for Mdm Chan was made possible by the new specialised dementia ward in Assisi Hospice's new premises in Thomson Road. The ward — the first of its kind in Singapore — offers self-contained facilities that allow patients to take part in activities within the ward to keep them safe. Safety is important for dementia patients as the illness inhibits their cognitive abilities.

Room furnishings are deliberately fitted in distinctive colours to help patients recognise objects around them. The patient can have meals with their family members in the communal dining hall, which is fitted with kitchen amenities, just like how it would be at home. The comfortable spaces within the ward make it possible for caregivers to meet and offer mutual support.

A PERSON-CENTRED PROGRAMME

This person-centred care is made possible by a new programme introduced with the support from Temasek Foundation Cares.

Assisi Hospice's Head of Medical Services, Dr Shirlynn Ho explains: "Dementia shortens life expectancy and it is very difficult to know how long someone with dementia will



Senior Minister of State (Health) Dr Amy Khor (standing 3rd from left) mingling with patients in Assisi's specialised ward.

live for, compared to someone who has another life-limiting illness, where their condition is likely to worsen in a more predictable way over a period of weeks or days and rendering palliative care for such conditions is fairly routine. As dementia robs patients of their personhood and disease symptoms manifest in different patterns in each patient, efforts in understanding them through their caregivers is important to provide the appropriate care. We need to acknowledge that each patient has specific needs and hence, a one-size-fit-all type of care model would not work."


The programme, seed-funded by Temasek Foundation Cares for two years with \$1.6 million, has care protocols to help understand each patient holistically. It takes into consideration their personal values, preferences and fears, family and social environment. The care team will then customise therapy and activities to support these patients in their final journey.

This new care programme adds to the existing care services available, including assistance in advanced care planning, clinical pastoral care, clinical management of symptoms, and assistance in daily activities.

RESPITE FOR CAREGIVERS

The new care programme, which was piloted late last year and seed funded with \$1.1 million over three years, also provides some respite for caregivers as they can depend on well-trained professionals who have intimate knowledge of the patients' unique medical, developmental needs and behaviours.

Amenities and comfortable private spaces support family bonding. Each single room has space for two caregivers to stay the night, a playground and playroom to enable patients to continue to have fun and bond with their siblings and friends.

Both hospice care programmes were unveiled on 12 April 2017 by Senior Minister of State (Health) Dr Amy Khor. 

A leap of faith

Stepping outside the comfort zone to brighten up people's life in their final days

While most of her peers scrambled to secure jobs, 25-year-old Trudy Chua took the time to carve out a career she was genuinely interested in pursuing. She opted out of a secure corporate job, took the plunge and decided to follow her passion to become a Music Therapist.

"I would have most probably looked for a position in the Public sector, one of the Ministry's Corporate Communications Department," says Trudy. With her background in New Media, Journalism and Economics, that seemed to be a given. But she was compelled to find a career that combined her loves of music and interacting with people.



Trudy (in yellow) celebrating the Lantern Festival with our staff and patients.

ASPIRE TO INSPIRE BEFORE YOU EXPIRE

An interview for a journalism module with Sister Geraldine Tan, a pioneer of Singapore's hospice movement, sparked Trudy's desire to serve in hospice care. After listening about Sister Geraldine's calling towards people in their final stage of life, she too felt the same. Trudy started volunteering at Bright Vision Hospital after the passing of her grandfather.

STEPPING OUT OF THE COMFORT ZONE

At the beginning of her volunteering journey, Trudy struggled with approaching patients in the ward. She recalled a patient who replied, 'Bu Hao (not good),' when Trudy greeted her, "Ni hao (Hello)".

"Meet them where they are, we are not there to make them happy, or brighten up their day," shares Trudy. That was an approach she adopted from BVH's Medical Consultant Dr Tan Eu Seng's during a volunteer briefing.

Sometimes, all it takes is music to brighten up a person's day. Trudy would sing to patients with a guitar or play their favourite tunes with her phone. "Their faces light up and sometimes, I can see them tapping their fingers to the music!"

Other times, she would just sit at the patients' bedside to keep them company "because we can spend quality presence with someone, without exchanging a word". Even after a patient lost his voice, she would sit by his bedside, play music and communicate through hand gestures.

UNEXPECTED FRIENDSHIPS

Many may find it difficult but to Trudy, it is a privilege and honour to walk with someone in their final days. It warms her heart knowing her simple gestures make a difference, especially when patients refer to her as a friend.

Our nurses and therapists also look forward to her visits and introduce her to more patients who appreciate music. "The support from everyone has been amazing," says Trudy. After the passing of her first friend, our colleagues rushed down to the ward to console her and made sure she was all right.

With the support of her friends and family, Trudy continues to pursue her dreams and currently teaches music part-time for schools. She will be studying a Master's degree in Music Therapy early this year. 🎵

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Sometimes, all it takes is music to brighten up a person's day.”

If you are interested in volunteering with Bright Vision Hospital, please email community@bvh.org.sg or call 6248 5755.



Clockwise from far left: CEO of HCA Hospice Care Ms. Angeline Wee (Left) and Mdm Ng Pick York at the cookbook launch in February 2017; a typical afternoon of song and laughter at HCA Day Care Centre.

Home away from home

For HCA's patients, the day care centre is a familiar sanctuary, abounding with love and kindness.

For many, home is where our loved ones are, and is a place of love and support.

It is in this same vein that HCA Hospice Care (HCA) models its Day Care Centre on. Often abuzz with laughter and chatter, the patients who attend HCA day care engage in a range of activities, ranging from music therapy, art and craft sessions, pet-assisted therapy to outings to different places of interest.

HCA's Day Care Centre is a place where patients find solidarity with each other and build friendships with staff and volunteers. It is the sense of community and social support that has touched the lives of many since HCA was founded in 1989.

PILLARS OF SUPPORT

HCA's slogan is "home is where the care is". For those living in isolation, the crushing weight of being afflicted with life-limiting illnesses can be particularly overwhelming. Our Day Care Centre plays a unique role: catering to patients who need moderate levels of supervision. HCA's two Day Care Centres at Jalan Tan Tock Seng and Kang Le Day Care at

Marsiling conducts constructive and therapeutic programmes targeted at improving the quality of life for the remaining time patients have.

Day care runs from 10am to 4pm on weekdays. In the morning, patients undergo physiotherapy sessions to improve their dexterity, and light exercises to keep them suitably active. The afternoons are filled with song and dance, which the patients revel in.

It is the sound of warmth that permeates this humble home-away-from-home that has provided respite and joy to countless terminally ill patients. "By attending day care, the patients are able to forget their problems — be it health or family — for a while," says Nancy Soon, HCA's Day Care Supervisor. "It's their second home, and they really look forward to the activities and outings to places like River Safari."

Some days, the patients engage in a spot of art-and-craft. These colourful masterpieces grace the walls of the Day Care Centres.

TOUCH OF COMPASSION


HCA has a strong base of dedicated volunteers who put their diverse

skills in the culinary arts, performing and even hair-cutting to good use. In 2016, HCA's day care attendance was a staggering 10,575 patients.

One of HCA Day Care Centre's regular attendants is 81-year-old Madam Ng Pick York, a cheery lady and avid cook who always greets staff, volunteers and other patients with a ready smile. She suffered a relapse of cancer in 2013 and was given a prognosis of four months. It was devastating news for Madam Ng, and she often wept quietly when she was first referred to HCA in January 2015.

Things took an uplifting turn with the encouragement of HCA staff and volunteers. The shroud of depression lifted, and in late 2016, Madam Ng was inspired to return the kindness shown to her in the best way she knew — through her love of cooking.

The HCA team compiled Madam Ng's time-honoured recipes into a cookbook, which is now on sale at Kinokuniya. Sale proceeds go to funding HCA's operations.

Madam Ng's story is unique yet similar to many of HCA's patients — each a tale imbued with love, care and the warmth of home. 



At one with the community

St Joseph's Home hopes to bring together residents and the community in its new Jurong West home through shared experiences and spaces

In the era of small flats and even tinier apartments, St Joseph's Home, one of three nursing homes under Catholic Welfare Services Singapore, comes as a surprise to those who have visited us since we moved back to Jurong West in February 2017.

Spread out over 1.5 hectares — about the size of one football field — and six storeys tall, St Joseph's Home is indeed one of the larger nursing homes in Singapore. At full capacity, it will be able to take in about 400 residents including those with dementia and hospice-specific needs.

The scale of the project meant that the design had to be thought through carefully, especially since the facilities had to be shared among all the residents of the Home.

Did we just want to build the new home to be bigger and bolder so we could accommodate more residents? Or was this a chance to imagine and create the spaces we feel strongly

about, infuse it with our philosophy of life, and in time, extend it so that it becomes one with the larger community?

We decided on the latter.

PEACE ROOMS

Once past the main entrance, the first thing that greets visitors is not the reception desk but two rooms named Hope and Shalom. They are our 'Peace Rooms' — places where our deceased residents lie before further arrangements are made. We believe that residents should enter our home with dignity and leave with dignity. So the first and final resting places were intentionally built adjacent to each other.

"It's like a circle of life...you come in through the entrance and leave via the same entrance," says Sister Geraldine Tan, Executive Director of the home and a nurse by training. The co-location of these spaces is a reminder to all who walk through the gates daily, that the hospice way of care — of putting people first and ensuring their

well-being and dignity — should permeate the rest of what we do.

WHEN LITTLE MEIMEI MET AUNTY MARY

With death and dying still largely shrouded by fear and misperception — and nursing homes are not short on such events — it is important to change the way people think about this part of life, especially from a young age.

Here at St Joseph's Home, we have carved out intergenerational spaces that encourage the young and the old to mingle and form friendships. In the second half of 2017, the Home will open an infant and childcare centre. It will be the first such centre to be set up within a nursing home. To encourage juniors to interact with seniors, an inclusive playground was also worked into the design of the Home.

By starting them young, the little ones learn how to approach and be with a senior. They also learn about disability and dying, the ageing process and the wisdom and pitfalls that come with it. In return, some seniors get to live life again through the eyes of the little ones, feel energised and find new outlets to share their ideas and stories. Interacting with someone eight decades younger may not be everyone's cup of tea but research has shown it to improve well-being and attitudes towards one another.

ONE WITH THE COMMUNITY


As we change the way we care for and with our residents, including the dying, we also want to involve the community. That is why we have been piloting projects and programmes that bring together the community and the residents.

Such community-resident projects will no longer just be bingo and karaoke as the typical pass-the-time pursuits. Life has so much more to offer. More importantly, having the community come in as friends enables our residents to feel connected and purposeful. This is needed for an eventual 'good death'.

But this can only happen if we open ourselves up to the community to come in, work with us and shape the future of the home. Just as it takes a village to care for junior, so it will require a community to look after the senior well, physically, socially, emotionally and spiritually.

Friendships are not formed overnight, but take months, sometimes even years of nurturing. That is what our community space, called 'The Funhouse' was built for. It is a place for our neighbours to pop by, initiate conversations and get involved so that the home is not just another dreaded 'death house' in their backyard, but a space they can call their own and be part and proud of.

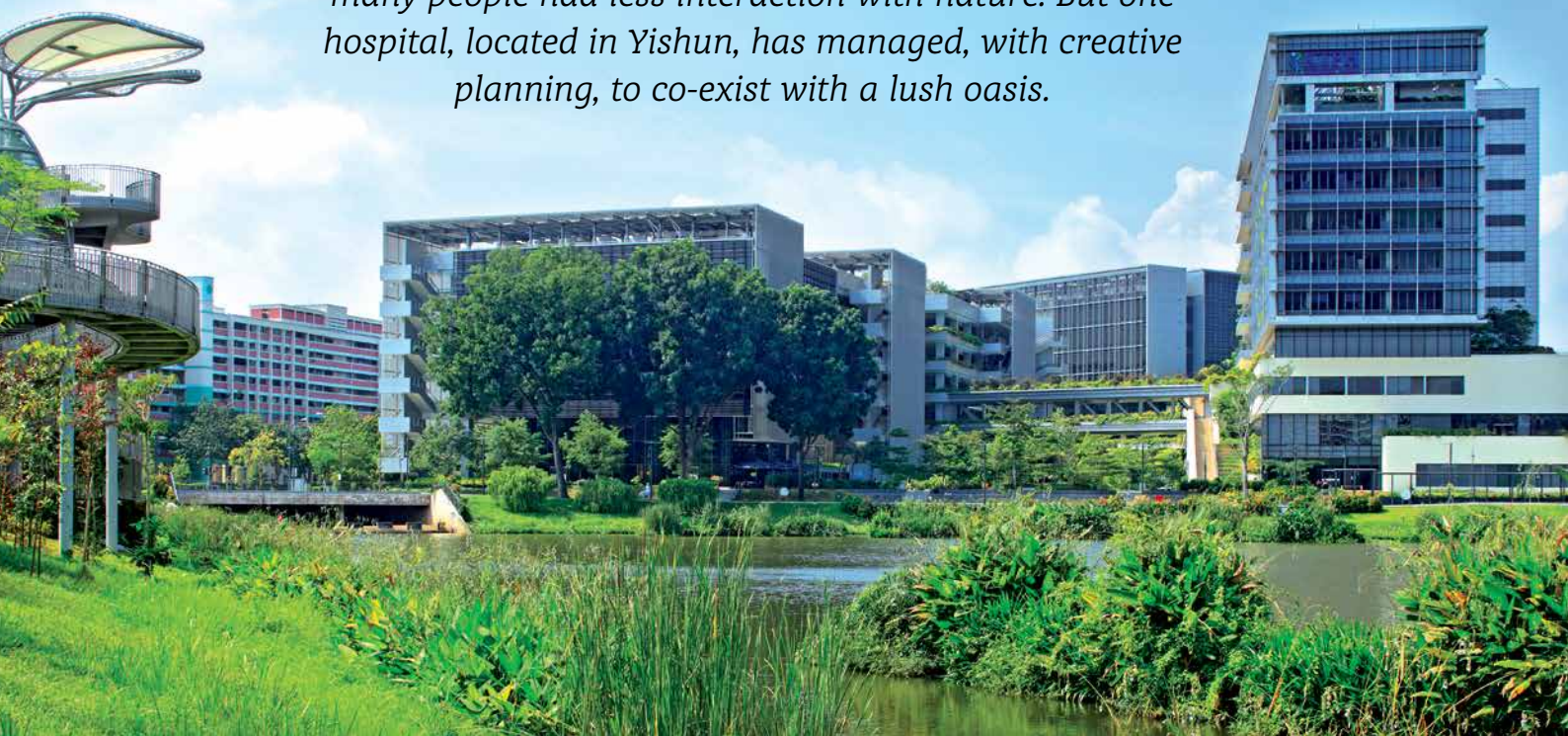


From the start, we knew we did not want just a typical nursing home. We wanted something that would truly reflect our mission and vision of enabling everyone to live and die with dignity. And so we've designed our physical space as such. The tougher job lies ahead, that of convincing hearts and minds — the emotional spaces — that this is what they should believe in too. 

Throughout St Joseph's Home, there are spaces where residents can interact with members of the community.

Hospital in a garden

Singapore is a highly urbanised cityscape where many people had less interaction with nature. But one hospital, located in Yishun, has managed, with creative planning, to co-exist with a lush oasis.



Research shows that stress and psychosocial factors affect a patient's health. There is also considerable evidence that shows how a few minutes of viewing plants and nature can cause positive psychological changes. Good feelings such as calmness and pleasantness are enhanced, while negative emotions such as fear, anger and sadness are diminished. Physiologically, viewing nature has been shown to lower blood pressure, decrease muscle tension among other effects.

With that in mind, Khoo Teck Puat Hospital was built as a hospital in a garden to provide a healing environment for patients, and to take the "coldness" out of a typical hospital setting. It has become a model for environmental conservation, reduced the hospital's carbon footprint, and created community involvement through volunteerism and placemaking.

"Experiments have shown that patients recover faster in environments with greenery. I'm quite sure that, if nothing else, the depression caused by being hospitalised will be lifted if the patients can see flowers and



WORDS: CERELIA LIM, EXECUTIVE CORPORATE COMMUNICATIONS,
KHOO TECK PUAT HOSPITAL PHOTOS: KHOO TECK PUAT HOSPITAL

butterflies and hear birds singing”, says Dr Ho Hua Chew, a conservationist who advised on the hospital on the design of its garden.

Gardens provide a pleasant environment for social support and privacy. Patients who are not confined to their beds can spend time with their loved ones in a serene setting. Such settings also allow bereaved families to gather and comfort one another.


Patients can also get views of the greenery from the wards. The therapeutic effects of foliage and the power of patients’ minds help their bodies to cope with the stress and trauma of being ill. Patients recover faster from their physical ailments and enjoy better mental health.

The hospital hopes that its gardens will inspire various schools, workplaces and residents to create similar green spaces in their premises and neighbourhoods. With some creativity and planning, lush oases can exist amidst the concrete jungle. Vertical and urban greening creates a soothing and aesthetically pleasing environment for work, play or rest. It also has a positive effect on the environment.

Equally important, it will increase and restore biodiversity to various pockets of

“

I’m quite sure that, if nothing else, the depression caused by being hospitalised will be lifted if the patients can see flowers and butterflies and hear birds singing.”

highly urbanised Singapore. This will encourage Singaporeans to discover the joys of being outdoors or be comforted by the nostalgia of being surrounded by familiar kampong flora and fauna. Communal spaces will encourage social interaction and active lifestyles, contributing to the overall health and wellbeing of the population. 



Greenery and nature is very much a part of the KTPH environment.

Right:
Co-Chairs of
the 2017 Asia
Pacific Hospice
Conference
Scientific
Committee, Dr
Chong Poh Heng
and Dr Allyn Hum.

Greater than the sum of its parts

Asia Pacific Hospice Conference to return to Singapore after 21 years of absence



This 12th edition of the Asia Pacific Hospice Conference (APHC), to be held from 26 to 29 July 2017, will be a momentous occasion for many reasons. After 21 years' absence, it marks the second time that the conference is returning to Singapore. This year also marks the 50th anniversary of the inimitable Dame Cecily Saunders' founding of the modern palliative and hospice care movement.

These are the reasons why we felt a conflicting mix of trepidation and excitement when we were first approached to be local chairs of the scientific committee. But together with a wonderfully energetic and hardworking local scientific committee, Professor Meera Agar representing the Asia Pacific Hospice Palliative Care Network, and Dr Neo Han Yee helming the abstract committee, an interesting and robust scientific programme that befits a meeting of such stature and significance was crafted.

The theme of the conference —

“Greater than the Sum of its Parts” — is inspired by the collaborative efforts between disciplines in caring for our patients and their families. Coming together as a collective “whole” to care for our patients as a “whole” has not only led to better care for our patients, but also led to the growth and integration of palliative care principles across the healthcare psyche.

APHC 2017 is an opportunity for us to come together to learn and inspire each other, and to encourage our community as we journey with our patients and their loved ones. We have been very encouraged and blessed by the generosity and graciousness of our speakers and chairpersons.

APHC 2017 will feature many exciting topics that will appeal to all healthcare providers, allied health practitioners, administrators, students and even volunteers. Full-day pre-conference workshops include discussions about conducting empirical research among vulnerable populations;

optimising nursing competencies through the feted ELNEC course; and managing distressing symptoms in the cognitively impaired or non-communicative child. The latter will be held at a pediatric palliative care master class. There will also be a psychosocial workshop run by highly experienced healthcare practitioners, which will be held in Mandarin.

The main conference will feature sessions on ethics surrounding hydration and nutrition at the end of life conducted by leaders in different fields of expertise; interdisciplinary panel discussions around the suffering of delirium; and the culture or rituals in care that explores the place of complementary and alternative therapies. Daily plenary session by some of the “rock stars” of the palliative community (including the Hinohara lecturer) are reasons enough to attend!

One of the most challenging tasks in the process of planning was accommodating everyone's wishes. Since APHC 2017 promises to be

the biggest palliative and hospice event in the region for the year, it is no wonder that everyone wanted to be a part of the vision. It speaks of the enthusiasm and interest that has buoyed the planning of this conference. What finally prevailed was the spirit espoused in the theme of this biennial regional conference: "Greater than the Sum of its Parts". It is in the same vein that we aim to create ample opportunities for participants to exchange ideas and experiences, to connect us as one network that shares the same vision of improving lives, both young and old.

We are honored to be part of the organising committee, and hope that all who endeavor to relieve suffering and strive to support our patients will be inspired and challenged at APHC 2017. The conference will continue to be a point of conversation with our friends and colleagues long after the party ends. See you there! 

“Coming together as a collective “whole” to care for our patients as a “whole” has not only led to better care for our patients, but also led to the growth and integration of palliative care principles across the healthcare psyche.



Tips for Caregivers

DR JAMIE ZHOU

Associate Consultant, National University Cancer Institute, Singapore
National University Hospital

There is no single definition for caregiving, but for the purpose of this article, a caregiver is any relative or friend, who provides a wide range of (unpaid) care to a person with a chronic or serious illness.

In your daily routine as a caregiver, you may encounter difficult conversations with your loved ones. Some examples are when your loved ones tell you “I have no more will to live”, “I need to talk about my funeral plans” or “Can you ask the doctor to give me an injection to die?”. Here are some tips on how to deal with these tough conversations.

Tip #1: Listen carefully before brushing aside “negative talk”

When faced with such challenging statements or questions, the common

reactions are to avoid, distract, change the topic or even pretend not to hear. While it is tempting to handle “negative talk” in these ways, these situations should be seen instead as BIG OPPORTUNITIES to understand your loved one better. Some examples of how you can respond are, “What have you been thinking about recently?”, “What has made you feel this way?” or simply offering a listening ear.

Brushing aside the “negative talk” is not going to stop your loved one from having those thoughts. What



might make them feel better is to have someone who listens to their deepest thoughts and fears.

Tip #2: You don’t have to fix everything

Caregivers are used to assisting their loved ones in daily activities and finding solutions to different problems. After listening to the “negative talk”, it is important to realise that your loved one does not expect you to fix everything. All they might need is to get it off their chest, so do not be too hard on yourself!

Upcoming Events

27 JUNE 2017

SHC-LCPC Multidisciplinary Palliative Care Forum (Topic: The “Difficult” Patient: Managing Challenging Behaviours in End-of-Life Care)

Speaker: Dr Ruth Chua Zi En

Venue: St Andrew Community Hospital Auditorium

Contact: Singapore Hospice Council (secretariat@singaporehospice.org.sg)

14 JULY 2017

HCA Hospice Care's Fundraising Dinner 2017

The fundraising dinner aims to garner support for Mr Lim Nghee Huat in his second attempt at the Ultra Great Britain 320km in August to raise funds for HCA. Mr Teo Ser Luck, Minister of State for Manpower, will be attending the dinner as our Guest-of-Honour. Table prices start at \$3,000.

Venue: To be confirmed

Time: 7.00pm-9.30pm

Contact: melB@hcahospicecare.org.sg

26 - 29 JULY 2017

12th Asia-Pacific Hospice Conference

The largest conference in Asia which brings together experts and practitioners from the region and around the world to share their knowledge and experience with the aim of improving hospice and palliative care within the Asia Pacific region.

Venue: Suntec Singapore Convention and Exhibition Centre

Website: www.aphc2017.org

Contact: secretariat@aphc2017.org

27 AUGUST 2017

DPH 25th Anniversary Sunflower Gala Ball: “A Sterling Affair”

The DPH Sunflower Gala Ball is one of DPH's signature fund-raising event that is held every year.

Venue: Grand Ballroom, The Ritz-Carlton Singapore

Time: 6.30pm to 10.30pm

Website: www.doverpark.org.sg/events/upcoming-events/

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