

THE HOSPICE LINK

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**Leaving in peace
and comfort**

**Reaching out to
those in grief**

**Palliative care:
The next lap**



SINGAPORE
HOSPICE
COUNCIL

PLUS
Special Tribute:
In loving memory
of Professor
Cynthia Goh

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Contents



- 2 Members' Contacts
- 3 Chief Executive's Note
- 4 In loving memory of
Professor Cynthia Goh
- 7 Leaving in peace
and comfort
- 10 Learning to go
the distance
- 12 Reaching out to those
in grief
- 14 The touch of angels
- 16 Singapore Palliative Care
Conference 2021
- 20 A guide to palliative care /
Upcoming events

“

Be a yardstick of quality. Some people aren't used to an environment where excellence is expected.”

STEVE JOBS

Most patients and caregivers know that early intervention can help everyone to make timely and important decisions that are relevant to one's wishes and there are no two caregiving situations that are the same. With the complexity of patients' needs, people with serious illnesses should not be subjected to compromised care. Singapore Hospice Council and its member organisations envision to:

1 provide quality palliative care for everyone

2 put your care as the top priority as we take on the role of being the collective voice of the palliative care community to advance public understanding

3 be the champion for quality palliative care services

In fact, palliative medicine is a young speciality that is only officially recognised in a few countries as a multidisciplinary team approach to improve the quality of life of patients and their families facing life-threatening illnesses. The goal of quality management in palliative care becomes necessary as the sector aligns the best practices which are important for effective identification of variance as the multidisciplinary team work together to give the best care and support to patients and their family.

Hence, quality improvement is one way of such alignment to encourage care collaboration for happier and more effective teams. Without alignment, each department or organisation may work independently with its own goals, data sets, and technology applications or in short, silos. By means of palliative-care-centric conferences, forums and quality improvement work, the

healthcare professionals are guided, trained and understand the best practices for delivering quality of care to those facing end-of-life. Quality improvement is critical to build and sustain success within their clinical missions.

Singapore Palliative Care Conference 2021 (SPCC 2021) marked the success of the detailed work of the palliative care team with many who trusted that the multidisciplinary approach is the prerequisite to balance curative and palliative intervention options. The optimal function of the standards cited in the workbooks forms the foundational document that defines:

1 the components of quality care for people with serious illnesses regardless of setting

2 the applicable standards for clinicians in all specialities and disciplines to delivery-assisted specialist palliative care services in preparing for a continuous quality improvement programme to assist patients and their families

The healthcare professionals who attended echoed the value of SPCC 2021 as it delivered excellent content that prescribed the tasks to better end-of-life care of the patients according to the wishes and needs of their families.

Therefore, be assured that you are not alone to address the many questions, ideas and insecurities that emerge. The multidisciplinary team will take care of you and your loved ones. All of you are equally important on this palliative care journey.

Ms Evelyn Leong
Former Chief Executive
Singapore Hospice Council
(article contributed in Dec 2021)



Clockwise from far left: Professor Cynthia Goh; Prof Goh attending to a patient at St Joseph's Home, 1987; Prof Goh presenting orchids to Dame Cicely Saunders, founder of the global hospice movement, at the "Hospice Care in Asia" conference, 1996; the late First Lady Mrs Wee Kim Wee (centre, with handbag) and Prof Goh (on her left) at the opening of the HCA office, 1990

In loving memory of Professor Cynthia Goh (1949 – 2022)

A wonderful leader, teacher and friend of the palliative care community in Singapore.

The passing of Professor Cynthia Goh, a compassionate 'giant' in palliative care locally, impacted everyone in the field deeply. She spent her last days with her family and loved ones and passed away peacefully at home on 13 February 2022, with the support of friends and colleagues.

Prof Goh passionately believed that patients deserved a dignified end in life, and hence worked tirelessly to improve quality of life for the terminally ill in Singapore. She was one of the first volunteer doctors who cared for dying patients at St Joseph's Home in 1986. Despite little knowledge and

experience in palliative care then, Prof Goh learned quickly on the job and had consulted St Christopher's Hospice, the first modern hospice in the UK. She recalled, "The patients were our teachers, telling us how to control their symptoms, and how to administer drugs for their pain."

Soon after, she again led the Hospice Care Group (HCG), the first charitably funded home care volunteer group for the dying in Singapore, which was adopted by Singapore Cancer Society in 1987. Very quickly, HCG expanded and was eventually registered as Hospice Care Association (HCA) in 1989, with Prof Goh as its first president. HCA (now

HCA Hospice Care) became the first independent and dedicated palliative care provider in Singapore, and is today the largest home hospice provider in the country.

By 1992, the hospice movement here gained momentum. However, the five hospice organisations at the time had operated autonomously. Prof Goh firmly believed that an umbrella organisation that consolidated and coordinated common needs would allow each hospice to focus on serving their patients. Singapore Hospice Council (SHC) was set up in May 1995 as a result. Prof Goh contributed as Chairperson from 2002

WORDS: SINGAPORE HOSPICE COUNCIL
PHOTOS: NATIONAL CANCER CENTRE SINGAPORE, THE SINGAPORE HOSPICE
AND PALLIATIVE CARE STORY: THE MOVEMENT THAT REFUSED TO DIE

Pioneers of the Singapore palliative care movement bid a fond farewell



I met Cynthia in July 1986. Dr Anne Merriman, a volunteer doctor at St Joseph's Home, introduced the two of us, describing her as "a young, beautiful lady" who was very interested in palliative care and who would like to volunteer to undertake the patients' rounds with her.

My first impression of Cynthia was that she was indeed very beautiful, full of energy, gentle and had the sweetest smile. She was a very warm person who made you feel at ease with her. In all our experiences with her, she has always exhibited tenacity, integrity, empathy, generosity and respect for others.

- Sister Geraldine, executive director, St Joseph's Home

I attended the funeral of Cynthia and was moved by the many tributes to her that came in at that special and loving service, and the tributes that continue come in for a very special lady. Accept my rose too, Cynthia.

Cynthia was my great supporter in the early days from 1985 to 1990, negotiating with the Singapore government, as well as handling publicity and donors. A gift to all she met, especially our patients, she was a lifelong friend to me, dedicated to the suffering in Southeast Asia to the end. She followed Christ, and when I talked to her in November when she was in Ireland to say goodbye to her son Charles and family, we talked about the many friends we had made whom she would meet in heaven. She knew and was ready to meet her Lord and those we have loved.

Rest with the Lord, Cynthia. I miss you already.
- Dr Anne Merriman in Uganda



I am sorry that Dr Cynthia did not share that her last illness was mortal. But, if she had done so, perhaps she too would have been overwhelmed by the outpouring of grief, love and gratitude shown in the hundreds of live chats during the funeral service and the tsunami of posts on Facebook. She has enriched the lives of so many and her contribution to palliative care is immeasurable.

I remember Cynthia as a lover of beautiful things. Some of our happiest hours were spent trawling small shops exclaiming over delicate fine porcelain, exquisite lacquer boxes and handcrafted embroidered linen. Cynthia loved shopping, especially if she was shopping for others. On our conference and teaching trips, we were always asked to help bring back the hundreds of items she had bought for the staff of the hospice and palliative care services. Each of these would be individually wrapped and distributed by Cynthia at Christmas.

Cynthia was a night owl. She did her best thinking and writing in the early hours of the morning. If I set my alarm for 4am to put the last touches on my conference presentation, Cynthia would still be at her desk. She would then go to bed having instructed me to wake her for breakfast.

Cynthia was a superb clinician. To watch her do a neurological examination was like watching an Olympic skater demonstrate their skill with grace and precision. But she also lived what she taught.

When she was told that her cancer had metastasised, she sought the best available evidence for the risks and likely benefits of more cancer treatment, and decided against it. She then faced her own death with great courage and equanimity. She committed to work as long as she could, and lived her last days with joy.

It was a great blessing that she spent her last Chinese New Year with her family from overseas and was able to die at home cared for by those she had inspired and taught. She will be greatly missed.

- Dr Rosalie Shaw



The newly elected office bearers of SHC, 1995. Prof Goh (standing) was honorary secretary

to 2004. The Council streamlined diverse activities across organisations, producing a common newsletter, providing education programmes and organising outreach activities. These evolved into our quarterly newsletter *The Hospice Link*, monthly Multidisciplinary Palliative Care Forum (MDF) for healthcare professionals, and the many community outreach events that SHC organises today. Prof Goh was also Chairperson of the committee that organised SHC's first conference "Hospice Care in Asia" in 1996. As of September 2021, she remained a Co-opted Council Member of SHC.

Her visionary achievements did not end there. Prof Goh was Head, Department of Palliative Medicine, National Cancer Centre Singapore when it first opened in 1999, which has since grown into a large consultative palliative care service at both National Cancer Centre Singapore and Singapore General Hospital. She was also Chair of the Asia Pacific Hospice Palliative Care Network from 2009, before moving to the advisory chair position in 2021.

Today, SHC continues to play an important role in representing palliative care locally, supporting policy making, upholding quality service provision across the sector, and advocacy through community engagement and public education. This is possible only because of steadfast efforts by pioneers like Prof Goh, who fervently believed in and delivered on the mission of the Council. This has inspired many of us who come after to continue the great work she started. Thank you and farewell, Prof Goh. You will be dearly missed. 🕯️

Loved and remembered by the Council, staff and members of Singapore Hospice Council

The palliative care community pays homage to a leading light

■ Assisi Hospice

Professor Cynthia Goh is very special and dear to the Assisi Team. She was instrumental in making Assisi Hospice the first in Singapore to provide the continuum of inpatient, home care and day care services. Significantly, her devotion and love in caring for each and every patient and their family according to their need shape our understanding of how we are to care for our patients.

■ HCA Hospice Care

We will always remember the late Professor Cynthia Goh for her careful and painstakingly detailed palliative care assessments to achieve whole-person care. To her, this was the heartbeat of palliative care, and she would seize every opportunity to guide and teach our clinicians. She often stressed that patients do not expect us to perform miracles, but they do expect us to do our best for them and to stand by them no matter what.

■ St Joseph's Home

Dr Cynthia Goh was a model of love, compassion and generosity until her very last moments with us. Her mission was one that made a great difference to the lives of many people around her. She has taught us the importance of patience, love, holistic care and support to people whom we care for, especially the dying. She left like she lived, gently, having made a difference and leaving beautiful memories in the minds of people whom she cared for and worked with.

St Joseph's Home is proud and privileged to have started the journey to establish and transform palliative care in Singapore with Dr Cynthia Goh in 1986. Since then, she has been part of the Home, providing continuous support, knowledge updates and guidance.

Thank you, Dr Cynthia, for the great privilege of having known you. We know you are still here among us. Thank you for reminding us that the present moment is precious, and that we should make the most of it by loving fully and generously.

■ Asia Pacific Hospice Palliative Care Network

The Asia Pacific Hospice Palliative Care Network mourns the passing of Dr Cynthia Goh, an incredible woman who dedicated her life to helping others die with dignity and who helped develop our organisation to transform the lives of many in the Asia-Pacific. Dr Goh has been, and will always be, an inspiration for our palliative care community. We will miss her dearly.



Leaving in peace and comfort

The new Violet Programme was created to meet the rising needs of patients at end-of-life with organ failure and dementia.

It was Chinese New Year Eve in 2021 when a member of the Violet Programme (ViP) team received a call from St. Andrew's Nursing Home (Henderson). "The blood pressure of Mr Tan*, a resident with gout and renal failure, has dropped. His godson insists that we send him back to the hospital but he is not keen."

A video call was arranged between Mr Tan and his godson. With a promise that "we will bring the hospital to him and make him comfortable", the godson finally gave his consent. The team set up a subcutaneous drip for Mr Tan and made some changes to his medication with his consent. By the following day, Mr Tan was sitting up in bed reading the newspaper when his godson visited. After that eventful Chinese New Year Eve, he did not make any further request for Mr Tan to be transferred to the hospital.

Mr Tan's condition deteriorated again a week later. Under medication to control his symptoms, his demeanour was serene.

The closing report from the nursing home stated: "Mr Tan was attended by the doctor and palliative nurse. The pastor saw Mr Tan at 1pm and assured him that he was going to heaven, a peaceful and beautiful place with God, with no fear and pain. Mr Tan was assured, smiled and passed away within the day."

Another ViP patient, Madam Sim's* right foot was dusky and cold. She grimaced as the nurse opened the wound dressing. Restrained as a result of her repeated attempts to remove the nasogastric tube, her agitation and shouting caused much distress and discord among her family members. She had unceremoniously removed the tube again, just before the home visit. The visiting nurse gently coaxed her to take

Top: The ViP@NH team (from left to right) of SACH Assistant Nurse Clinician Mok Foong Yue, SACH Advanced Practice Nurse Catherine Teo and SACH Resident Physician Dr Shaun Nathan at St. Andrew's Nursing Home (Queenstown)



the “thickened water”, which she seemed to enjoy. Her pain medication was also adjusted.

A very independent lady who had paid special attention to her grooming and appearance in her younger days, recurrent strokes had left Madam Sim a shadow of her former self. Knowing their mother, it was clear to her children that an amputation to deal with worsening circulation in her leg would not be consistent with her wishes. They were less clear about the feeding tube; it did seem like her lifeline.

A family conference involving all four children was arranged the following day.

The two days of Madam Sim eating normally with less agitation set the stage for a consensus between the children and the clinical team as to the goal of care and how to handle the expected decline.

She passed away about a week later: calm, comfortable, with the family at peace.

Originally conceived in 2016 to address the rising end-of-life needs of patients with organ failure and dementia at home and extended to residents of nursing homes in 2019, ViP took off in the midst of the COVID-19 pandemic in 2020, as a partnership between St. Andrew's Community Hospital (SACH), St. Andrew's Nursing Homes (SANHs) and Changi General Hospital (CGH).



A service which adopts a specialist-on-generalist approach, it targets non-cancer patients and residents of nursing homes, whose prognoses are often uncertain. The programme aims to ensure continuity of care amid fluctuating demands with responses from the specialist palliative care teams or the generalist teams, as appropriate.

Patients are referred to the programme by staff of the home care programme, nursing homes, or CGH. Under the programme, the home nursing, home medical team or nursing home care teams provide general palliative care for these patients, while the ViP team steps in to manage patients' symptoms when complexities arise. Under this new model of care, patients whose conditions stabilise will continue to be cared for by the home care and nursing home care teams and referred back to the palliative team if their condition deteriorates.

Top (from left): SACH Advanced Practice Nurse Catherine Teo with a resident of St. Andrew's Nursing Home (right): SACH Advanced Care Nurse Kahvidah Mayganathan and SACH Senior Resident Physician Dr Karen Liaw with family members of Madam Sumiah

The programme aims to ensure continuity of care amid fluctuating demands with responses from the specialist palliative care teams or the generalist teams, as appropriate.

A system of rapid response with 24-hour coverage and support for patients with more complex needs provides a layer of support for the generalist teams. Training of home medical, home nursing and nursing home staff (the “generalists”) to build their palliative care capabilities and to identify palliative needs, manage common symptoms, facilitate goals of care discussions and guide families as well as caregivers through the patients' last hours, is crucial. Close partnership between the ViP team and the other teams is key.


Mr Khairudin, son-in-law of ViP patient Madam Sumiah shared, “ViP, a SACH Home Palliative Care Programme, has equipped my wife and I with better awareness and understanding of my mother-in-law's medical condition and well-being. We received guidance from the doctors and nurses through their close monitoring of her medical condition. This has allowed us to detect and recognise her symptoms early so that we can seek treatment for her medical condition. With support from ViP, my mother-in-law is able to receive treatment in our comfortable home environment. We are happy to be in this programme as we have gained more knowledge in taking care of the elderly. It has also enabled us to care for my mother-in-law while saving time and cost.”

From the inception of the programme in August 2020 until December 2021, the team had supported 181 patients at home. Of these, 97 of the 109 patients (or about 89%) who passed away did so at home. The team also supported



149 residents of nursing homes; 91% of them passed away in the homes.

By enhancing access to community palliative care, ViP helps to reduce admissions to hospitals, expands the reach of palliative care to more people with complexity-appropriate management by the different care teams and provides reprieve to patients' families who are going through an emotionally challenging time. More importantly, the programme also helps home care and nursing home teams find closure on their journeys with their patients.

In recognition of the team's work, the ViP team was awarded the Singapore Health Quality Service Awards 2022 (Best Team Award). 

**not their real names*

Top (left-right): SACH Advanced Practice Nurse Kahvidah Mayganathan, and SACH Senior Resident Physician Dr Karen Liaw tending to Madam Sumiah; Below: ViP team

WORDS DR KAREN LIAW, SENIOR RESIDENT PHYSICIAN, SACH; DR SHAUN NATHAN, RESIDENT PHYSICIAN, SACH PHOTOS ST. ANDREW'S COMMUNITY HOSPITAL, SINGHEALTH



Learning to go the distance

Yishun Health's GeriCare team builds bridges and overcomes hurdles to pave the way for healthcare workers on their learning journeys.

GeriCare, a partnership network comprising Yishun Health and eight nursing homes, has been broadening the existing training and learning opportunities.

The latest initiatives — PowerFacts and #midwksnack — can be described as snack-and fun-sized. These new digital resources launched in February 2021 are small and easily digestible snippets that would fit into a busy healthcare worker's schedule.

Learning does not have to be time-consuming or boring. PowerFacts is a series of short animated video clips on Youtube that serves to educate healthcare workers about palliative and geriatric care. For instance, in



one four-minute video, we understand grief through the eyes of a squirrel who has lost his acorn. In another, we follow John through his active dying process together with his family and healthcare team.

In addition, GeriCare's new series of informational comics #midwksnack can be found on Instagram, bite-sized food for thought to enrich one's day. The content could vary from short snippets of information to illustrate concepts in palliative and geriatric care, to prompt for pause and self-reflection. Some of these comics are illustrated in collaboration with local artists.

GOING DIGITAL TO KEEP GOING

Since 2010, GeriCare has harnessed digital technology in its work. The team has facilitated tele-consultations between Yishun Health and nursing homes, along with training courses for nursing home staff in geriatric and palliative care. These further GeriCare's mission to allow nursing home residents to gain access to quality healthcare.

When the COVID-19 pandemic struck, safe distancing measures limiting cross-institutional movements were put in place to protect staff and residents. This affected face-to-face training at a time when nursing home staff needed to be trained in new tasks, such as swabbing.

In response, GeriCare adjusted its training to move onto online platforms via videoconferencing technology, allowing training to continue. The reception was positive — attendance did not dip and 433 nursing home staff attended the training courses in the midst of the pandemic.

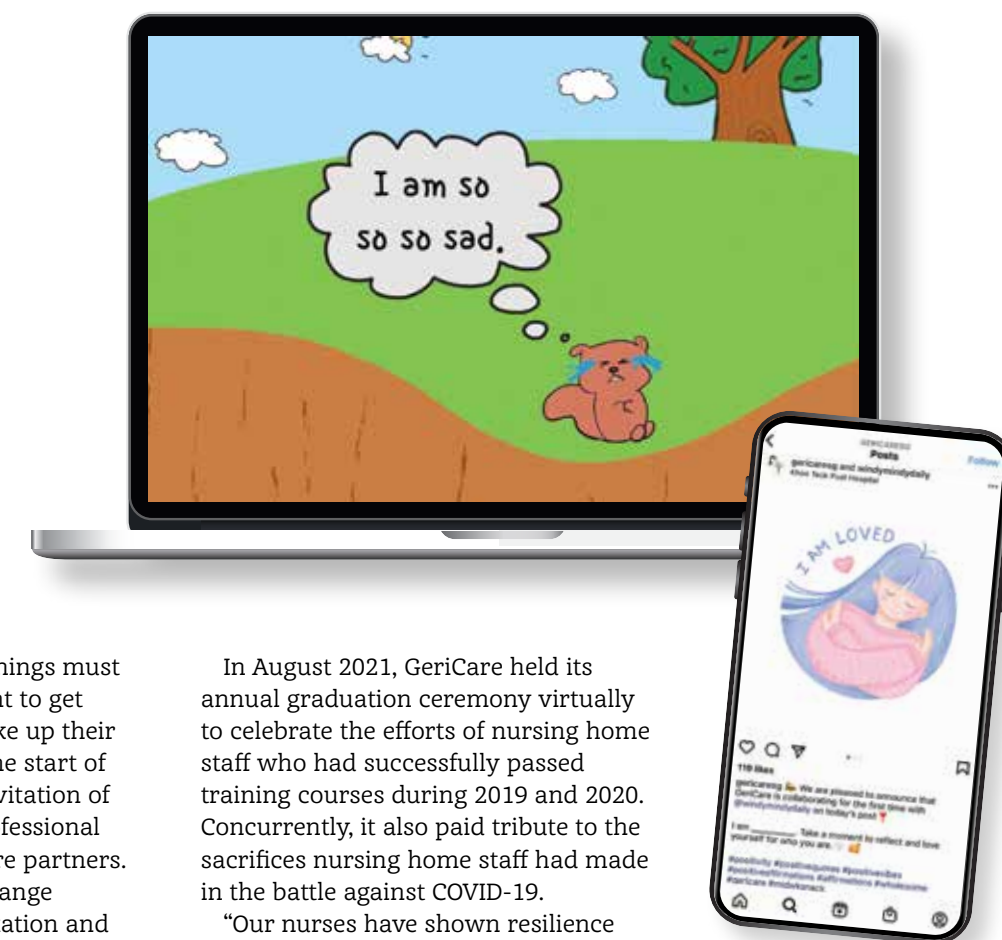
Living by the mantra “good things must be shared”, GeriCare also sought to get more healthcare workers to take up their learning opportunities. From the start of 2021, GeriCare extended the invitation of its TeleCPE (Continuing and Professional Education) talks to non-GeriCare partners. The topics covered in TeleCPE range from palliative care to rehabilitation and mental wellness.

A LABOUR OF LOVE

Juggling work, family and training isn't easy even in the best of times, but during the COVID-19 period, it called for double the perseverance, with numerous spanners being thrown into the works.

In August 2021, GeriCare held its annual graduation ceremony virtually to celebrate the efforts of nursing home staff who had successfully passed training courses during 2019 and 2020. Concurrently, it also paid tribute to the sacrifices nursing home staff had made in the battle against COVID-19.

“Our nurses have shown resilience and fortitude for the sake of our residents and patients. It all comes from our desire to provide care and love for our residents in the nursing homes, many of whom are alone, marginalised and forgotten,” said Associate Professor James Low, Clinical Director, GeriCare. 🙏



Opposite (top-bottom): GeriCare Virtual Graduation 2021 ceremony, a tele-training course in progress; Above: PowerFacts and #midwksnack give bite-sized information



WORDS: TAN SHI HUI, EXECUTIVE, POPULATION HEALTH & COMMUNITY TRANSFORMATION, YISHUN HEALTH. PHOTOS: GERI-CARE TEAM, YISHUN HEALTH; AZMI ATHNI, PHOTOGRAPHER, CORPORATE COMMUNICATIONS, YISHUN HEALTH

Improving communications and problem solving

“The palliative and TeleGeriatrics Nurse (TNTC) training courses helped me grow to become more sensitive to my patients' whole being including their physical, emotional, and even social needs. Before, my voice trembled every time I spoke to patients' relatives but now, I am able to communicate about my patients' issues to their relatives because I understand them better. I am happy to be an effective caregiver and offer comfort and a meaningful life to my patients and their families despite their conditions.”

- Josephine Calderon, Enrolled Nurse, The Lentor Residence

“After attending the courses, I improved in identifying and assessing the clinical problems of residents and am able to carry out suitable interventions and treatments for them. Also through the role-playing exercises, I am able to better communicate with family members and caregivers.”

- Manikandan Prema, Staff nurse, Sree Narayana Mission Nursing Home

Reaching out to those in grief

The journey doesn't end with the departure of a loved one, but continues in the comforting of those who have to deal with the void in their lives.



Bereavement care is part of the continuum of palliative care for patients and their families and is as important as the care before the end. While bereaved persons are mostly able to cope with their bereavement within their own support network, there are some who will benefit from professional help. These may include those who experience traumatic loss when the death is perceived as sudden, untimely or unprepared for. Those who have limited social support, difficulties coping with the loss of a child or experienced multiple losses in the family will also need more trained counselling. This group would also include people with known mental health conditions, or who have

expressed suicide ideation or have carried out suicide attempts in the past. It is important for them to receive the needed support on their grief journey.

Assisi Hospice has strengthened bereavement support through the creation of the specialised Bereavement Care Programme, which reaches out to more family members of our late patients through individual counselling, art and music therapy and support groups when needed. From January to November last year, the Bereavement Care team reached out to over 394 families in the first month after their loss to assess their need for support, and over 110 family members of our late patients received support from the Bereavement Care team.

The members of Assisi Hospice's Bereavement Care Team have shared the stories of family members of former patients who benefited from the Bereavement Care programme.

SHE LEARNED TO SAY GOODBYE

Madam Tan (name has been changed) was devastated when her husband, a patient of Assisi Hospice, passed on. She had been married for many years and her family requested for bereavement support when it appeared that she was in denial. She was having disturbed sleep and would visit the place where his wake had been held, in the hope of seeing him again. She also had poor appetite, experienced giddiness and sudden crying bouts, especially when she visited places they had visited together.

Assisi Hospice's Senior Medical Social Worker/Counsellor Ivey Tee said, "She knew that he had passed on, but she was unable to accept it and still held on to a hope that he would be back. Before she was emotionally ready to confront the fact of loss, this small hope seemed to give her strength to live on."

Ivey, who is from the Bereavement Care Team, started providing face-to-face counselling for Madam Tan once or twice a month. It was half a year after her husband's passing that she gradually accepted that he was not coming back. Coming out from the shell of denial and facing the loss was not easy for Madam Tan at all. It was cruel to her as it meant a permanent loss of her beloved life partner and the purpose of her remaining life.

Ivey continued to journey with Madam Tan for over a year. During the counselling sessions, Madam Tan learned coping strategies to manage her emotions, including breathing techniques, creating rituals to reminisce her

husband, reconstructing new meaning of her losses and even dreams. With facilitation on her narration of loss stories, she recollected the preferences, values and perception of her late husband with regard to his care, dying and death, which helped her to look at his death from a different perspective and embed it with new meanings. Madam Tan also began to explore and discover her new roles in the family, which gave her a sense of purpose that eased her into her post-loss life. Gradually, she was able to say goodbye to her late husband.

YOUNG CHILD OBTAINED CLOSURE THROUGH ART THERAPY

Eight-year-old Alice (name has been changed), the granddaughter of a patient, had always been a sensitive

and empathic child who would cry when hearing about death or watching scenes from TV portraying death. Alice's mother decided to keep her from visiting her seriously ill grandfather during his stay in the hospice and from attending the wake and funeral when he passed on, as she was afraid that it would be too emotionally overwhelming for her. As such, Alice did not have a chance to see her grandfather before he died nor say goodbye upon his passing. Alice dreamed of him, cried and wondered why people had to die. Alice's mother agreed to a referral for art therapy sessions with Assisi Hospice Art Therapist Vivian Wong from the Bereavement Care Team, to find out if art therapy could provide deeper insights into Alice's thoughts and how she was coping emotionally.

Vivian held three art therapy sessions with Alice



Below: The memory box made by Alice and her mother

Subsequently, she created roses with air-dry clay to be placed inside the box. Her mother worked alongside, creating a round paperweight, with a heart in the centre and Chinese characters that conveyed "I love you, Father". Alice raised questions about staff actions when patients die, whether the bodies looked scary, and how did her grandfather looked when he passed on. Vivian answered her queries and her mother assured her that her grandfather passed away looking peaceful. Alice expressed feeling "weird" that "Gong Gong" was no longer with them, to which her mother said with teary eyes that "it takes time" for them to get used to it.

In the final session, Alice told Vivian that the completed memory box was placed near to her bed.

She co-created a friendship bracelet with Vivian and wore it on her wrist as a parting gift.

Vivian said, "The sessions provided a safe space and dedicated time for Alice to express her thoughts and to seek

answers surrounding her grandfather's death; and for her mother to explain her decision and actions. Both mother and daughter were given the opportunity to create tangible items to remember their loved one. With their love and wishes for their father and grandfather translated into artworks kept safe in a box, this engendered a sense of closure and continuing bonds with their loved one who has passed on. There was mutual support between mother and daughter as they honoured their loved one within the same space. Working together and listening to each other affirmed the trusting relationship they share."

The touch of angels

The HCA Vigil Angels programme focuses on the dignity of the imminently dying and provides respite for their loved ones.

HCA Vigil Angel Foong Yuet Foong distinctly remembers her first assignment with the programme. The patient was a frail, elderly lady with a large tumour on her neck. Yuet Foong had been unsure about her ability to fulfil her duties, as she did not have any medical training. “But Amy just smiled in response and told me it’s the heart that counts, and she would guide me along,” Yuet Foong said.

HCA Nurse Educator Amy Lim is currently helming the programme, which began in mid-2019.

“Nurse Amy carefully cleaned the patient’s upper body, while another volunteer and I sponged her legs,” Yuet Foong recalled. “Afterwards, we gave her a gentle massage and she was able to sit up after the session.”

“This was very encouraging for me, especially when the patient’s family told us that she was able to sleep soundly after the massage, and also requested a second session.”

DIGNITY ON THE LAST LAP

The final days are often fraught with emotions for the patient’s loved ones, as they try to come to terms with the impending loss and grief. As the patient’s condition deteriorates, caregivers and family members are sometimes hesitant to clean and sponge him or her, for fear of causing more pain and distress.

Yet, research has shown that an overwhelming majority of terminally ill patients express a simple wish to be kept physically clean and comfortable at the end of life. It is this basic, yet crucial, aspect of human dignity that the Vigil Angels programme focuses on, while providing a calming and reassuring presence for everyone in the household.



Left: Vigil Angels performing a gentle massage;
Below: A Vigil Angel providing a manicure service

Vigil Angels like Yuet Foong undergo thorough training prior to taking on assignments, and are also accompanied by medically trained HCA staff on these home visits. Each session generally includes bed sponging and gentle massages with aromatherapy oils to relieve musculoskeletal aches. The Vigil Angels also try to fulfil more specific wishes, such as a haircut, or even a manicure, for the patient. They would often suggest playing the patient’s favourite music and doing some simple tidying up, if need be, to create a more serene environment.

At the end of life, patients are often unable to speak or move much, but these little sensory touches contribute to a relaxing experience, evident in the little smiles and thumbs-up gestures they try to muster.

PROVIDING RESPITE

The efforts of Vigil Angels not only entail the care they provide for patients, but also the respite and support accorded to their families. The presence of the Vigil Angels enables caregivers and family members to catch a breather and take a much-needed break from the round-the-clock caregiving they’ve taken on. In addition, witnessing

the relaxation their loved ones experience, under the gentle touch of the Vigil Angels, also brings much comfort.

For the Vigil Angels, each assignment offers an intimate glimpse into the lives and vulnerabilities of strangers. It is a volunteering experience like no other, irrevocably changing the way they view life and death.

“It really takes a lot from volunteers — they have to devote all their attention and energy to the patient and their loved ones,” said Vigil Angels programme leader, Amy. “The experience reshapes people — whether positively or negatively.”

Amy also makes it a point to conduct an informal debrief after every assignment, to ensure volunteers are not emotionally overwhelmed, and to provide them with an outlet for their thoughts. “I have a responsibility to ensure that my Vigil Angels do not bring any unhealthy emotions back home,” she explained.

The Vigil Angels programme has grown significantly since its launch, with more committed volunteers coming on board. Building the emotional resilience of Vigil Angels equips them with the endurance to go the distance and derive greater meaning from their volunteering journey. 🙏





Singapore Palliative Care Conference 2021

This seventh edition with its theme of “Embrace. Engage. Envision.” has successfully concluded with much knowledge shared and advanced.



Above, left to right: (top row) Guest of Honour Singapore Minister of Health Mr Ong Ye Kung, SPCC 2021 Organising Committee Chairperson Dr Neo Han Yee; (bottom row) SHC Chairperson Dr Patricia Neo, Head and Senior Consultant of Palliative Care at National University Hospital Dr Noreen Chan at the Opening Ceremony

Many now prefer to spend their last days in the comfort of their home and in the presence of their loved ones, said Health Minister Ong Ye Kung, Guest of Honour at the virtual 7th Singapore Palliative Care Conference (SPCC 2021). This event aims to provide a platform where academic learning and collaborative discussion can take place, to shape a shared vision of clinical excellence which balances quality and sustainability of palliative care. The main conference on 9 and 10 December 2021 and three workshops conducted between 7 to 17 December 2021 saw a total of more than 400 participants, 75 speakers and 10 abstract presenters from Singapore and overseas coming together to share knowledge and best practices in the field of palliative care.

WORDS & PHOTOS SINGAPORE HOSPICE COUNCIL; BRAIN BANK SINGAPORE, THE LIFE CELEBRANT

Opposite page (main): A snapshot of the SPCC 2021 virtual platform. Video-on-demand was available till 10 January 2022; Right: The Lifetime Achievement Award was presented to the late Associate Professor Cynthia Goh by Singapore Minister for Health Ong Ye Kung, and SHC Chairperson Dr Patricia Neo

In Singapore Hospice Council's (SHC) public and healthcare professional surveys in the last two years, 53% of Singaporeans and Permanent Residents, and 57% of healthcare professionals are aware of hospice and palliative care, an improvement of about 20% since 2014. As mentioned by Minister Ong in his Opening Ceremony speech, the Government will continue to support caregivers, expand palliative care capacity to meet the growing demand, and raise palliative care capabilities by training competent and qualified healthcare professionals.

During the Opening Ceremony, the late Associate Professor Cynthia Goh, an exemplary leader and pioneer in palliative care in Singapore and the



The conference also highlighted the importance for society to discuss sensitive issues of death more openly and honestly.

Brain donation for research

Brain Bank Singapore (BBS) participated for the first time at the Singapore Palliative Care Conference 2021 (SPCC 2021) as a sponsor-exhibitor, considering the event to be a great sharing platform for healthcare professionals, and also members of the public who would like to learn more about caregiving towards the end-of-life. BBS was only set up in November 2019 and considered SPCC 2021 an invaluable opportunity to raise awareness about this relatively new national brain repository. The brain bank is vital to support biomedical research that reflects the diverse Asian genetic background, in the hope of finding better treatments for brain disorders such as dementia, Parkinson's disease and depression. This was a good fit with the conference's key message of leaving a meaningful legacy for future generations. During the two-day conference, the BBS team had many opportunities to reach out to the delegates who attended SPCC 2021. Although the exhibitor booth is a virtual one and may lack in-person interaction, the platform also has functions to notify when an attendee has visited the booth for information. There were other useful communication features in the virtual exhibitor booth, for example Chats (or private messages versus public posts) which the BBS team used to engage with attendees. The set-up of the virtual exhibitor booth also allowed videos, brochures, newsletters, website, consent forms, Facebook and other interesting news articles to be accessed by attendees at their convenience. BBS will continue to engage further with HCA Hospice Care and Assisi Hospice for educational purposes.



Emotional Wills

Angjolie Mei, founder of *The Life Celebrant* and a speaker at SPCC 2021, shared the importance of putting plans in place to lessen the grief and pain of those left behind as well.



The Mandai Crematorium was festooned with huge portraits of Agnes, her paintings of flowers and baskets filled with origami.

For an hour, her loved ones were treated to a medley of songs which she had either sung herself, or devised lyrics to.

At the end of the funeral, as the guests started streaming out for the reception, her voice rang out for one last time: "Alamak! You are still here? It's time to go. Don't worry, you and I, we are just on a long holiday break away from each other. When the time and conditions are right, we will meet again. Have a good day."

The laughter which greeted her last announcement was genuine.

Aggie had made the voice recording and planned every detail of her funeral.

She met us from her hospital bed, ironing out the details, and every time there was always laughter. It would have sounded as if we were planning for a party.

Bubbly and upbeat Agnes, who had been stricken with cancer, knew she wanted her guests to not only cry, but also smile, laugh and be surprised. She wanted to celebrate her life.

When we die, easing the pain of loss of those we leave behind goes beyond financial issues. There is an emotional will to think about too. This is a powerful will which many neglect, because it conveys our last words to our loved ones.

It is the part of you which you want to leave behind. Not your money, your estate, your insurance or all the 'hard' aspects of your life. It's you.

Here are some tips on how you can leave an emotional will or legacy for your loved ones to remember you after you are gone.

- Plan your own funeral. Agnes' meticulous planning of her funeral to reflect her personality made it seem as if she was joyfully "graduating from life" as her loved ones accompanied her on her final journey.
- Make audio or video recordings. In the digital age, this is nearly effortless. For your loved ones, it is very comforting to be able to hear your voice, maybe even hear you sing, or see you as you were in life, captured for eternity in bits and bytes.
- Write letters to be opened after your death, whether at key life milestones of the children or on anniversaries.
- Write a memoir. We don't mean a 200-page autobiography, but some paragraphs about your life story, or key moments in your life, which you can dedicate to your family.
- Create a video story. In the US, an elderly couple's children hired a professional videographer to document their parents' daily life, interspersed with interviews. Every child was given a copy of the video, so that when their parents passed away they would always have the video, which they can show to future generations.
- Put together a time capsule. Technology now allows you to "connect" with your descendants even after death. Some radical ideas include dispensing pre-recorded messages at significant times or dates in the future, like a grandchild's 21st birthday.




Left: SHC's exhibition booth; Opposite page (from top): Aggie's coffin was festooned with lovingly folded origami hearts and flowers; Aggie had modified the lyrics of "My Favourite Things" from *The Sound of Music* movie, to reflect her own favourite things and she shared the modified song with all her guests

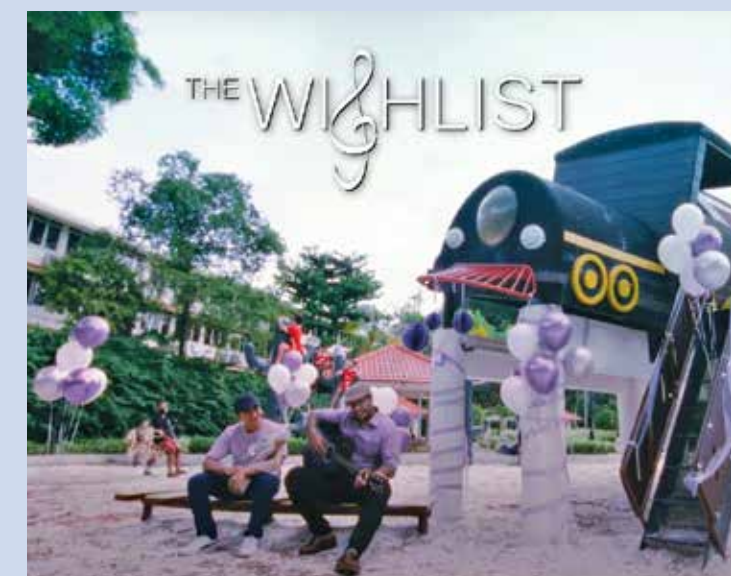
Asia-Pacific region, was awarded the Lifetime Achievement Award 2021 for her outstanding contributions to the development of palliative care in Singapore and internationally. She was inspirational in her outreach to develop palliative care in the developing countries in the region.

Dr Neo Han Yee, Chairperson of the Organising Committee of SPCC 2021, shared in his opening message that palliative healthcare professionals have always found their calling in the deepest of human suffering as they aspire to comfort, usher peace and bring closure to patients and their loved ones. Once again, Singapore Hospice Council and the Organising Committee of SPCC 2021 would like to thank all healthcare professionals for their tireless work in the advancement of palliative care in Singapore.

The conference also highlighted the importance for society to discuss sensitive issues of death more openly and honestly. Through SHC's "Live Well. Leave Well." awareness campaign efforts, more people have recognised the value of Advance Care Planning.

SHC also launched its second short film *Er Jie* during the conference, on how palliative care can provide support to patients and their families facing the challenges of life-limiting illnesses. 

Release of short film: *The Wishlist*



Singapore Hospice Council (SHC) will be releasing its third short film in March 2022, titled *The Wishlist*. The film aims to serve as an encouragement to everyone to make their end-of-life and funeral plans early, and to let their loved ones be aware of their plans while still healthy and of sound mind. Watch it on SHC's YouTube channel at <https://bit.ly/3G27ICz> or scan this QR code.



A Guide to Palliative Care



When Winston Minezes required assistance for palliative care referral for his mother, he called the Singapore Hospice Council (SHC) and got in touch with one of its staff, who directed him to SHC's Common Referral Form on the SHC website, and explained

to him about the palliative care services available. After learning how the multidisciplinary team can support patients and their family, his worries were eased. His mother was later referred to HCA Hospice Care and in her final hours, received treatment from

the home care team and passed away comfortably with no pain and suffering. Winston conveyed this message of thanks to SHC: "I cannot thank you enough for all the advice you gave me since the first time I spoke to you. I really appreciate your work."

It remains a key goal for SHC to ensure that patients, like Winston's mother, receive a dignified end-of-life through palliative care. To facilitate easier access to information, resources and services on palliative care, SHC has also launched new initiatives online. These include an interactive game for youths titled "The Living Game"; "Life Film", a short film series on palliative care; and a one-stop-resource Library website. By March 2022, SHC's third short film *The Wishlist* and all episodes of "The Living Game" will be released. *For more information, please visit singaporehospice.org.sg.*

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Upcoming Events

APRIL - MAY 2022

SHC Exhibition @ National Library Singapore

Date: 1 April 2022 - 31 May 2022

Venue: Bishan Public Library, Level 1 Foyer, 5 Bishan Place, #01-01, Singapore 579841

Visit us at our exhibition to learn more about palliative care and end-of-life care matters. All visitors are welcome to take SHC's books and resources home for reference.

APRIL - JUNE 2022

SHC "Live Well. Leave Well."

Professional Series @ The Public Libraries

Date: 25 April, 30 May, 27 June

Venue: Online via Zoom

Join us for open discussions on palliative care with healthcare professionals. This series will be held monthly till December 2022. Visit singaporehospice.org.sg for the latest updates.



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