

THE HOSPICE LINK

SEPTEMBER – NOVEMBER 2023 • MCI (P) 105/03/2023

Building Compassionate Communities

The comfort
of music

Capturing
the heart of
palliative care



SINGAPORE
HOSPICE
COUNCIL



GOLD AWARD
(Newsletter Series)

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Make a Donation!



Singapore Hospice Council (SHC) is committed to improving the lives of patients with serious life-limiting illnesses and to giving support to their loved ones. Support SHC today to impact lives.

*Cash donations are eligible for 250% tax deductions.

EXECUTIVE DIRECTOR'S NOTE



Ms Sim Bee Hia (left) with The Straits Times Senior Health Correspondent Joyce Teo

While pondering what to pen in this Note, my interview on “How to make it easier for people to live till the end at home” with *The Straits Times* for their *Health Check* podcast was published. As I shared in the interview, it's not as simple or straightforward to die in the comfort of our own home, surrounded by loved ones in our last moments. For a patient facing a life-limiting illness with such a profound desire, there are just so many aspects to consider: the illness trajectory, the complexities of the illness, their caregiver's confidence and ability to manage their needs at home, as well as the availability and accessibility of support from their community — neighbours, employer, community care team, and multidisciplinary palliative care team. All these factors must be aligned and work in synergy for a patient's care preferences to be honoured.

This issue of *The Hospice Link* brings to you articles from palliative care experts who are among the best in the world (page 12), community leaders who can make change happen (page 22), passionate youths whose actions are making an impact in the community (page 20), and the most awesome furry volunteer, Onyx (page 14).

Ask yourself: what can and should you do? Being a prepared patient, a confident caregiver, an understanding colleague, a supportive friend, or simply a committed volunteer goes a long way towards being one of the stars to be aligned.

Take action today and be part of our efforts towards fostering a compassionate community to achieve a dignified and quality end-of-life for everyone.

Sim Bee Hia
Executive Director
Singapore Hospice Council



Scan to listen:
The Straits Times
Health Check
podcast episode

TAKE ACTION TODAY AND BE PART OF OUR EFFORTS TOWARDS FOSTERING A COMPASSIONATE COMMUNITY TO ACHIEVE A DIGNIFIED AND QUALITY END-OF-LIFE FOR EVERYONE.

BONDING IN CARE

NEWS, VIEWS, UPDATES AND SPOTLIGHTS

Meet the Team

SENIOR MEDICAL SOCIAL WORKER
PAUL BASHYAM

HCA Hospice

Medical social workers journey with patients and their families, helping them navigate a myriad of physical, psychological, and emotional challenges. Their work centres on assessing the patient's needs, directing them to the right resources, and ensuring that the patients and their families experience a good end-of-life journey.

"As a social worker, our job is multifaceted. We often have to work with various systems and stakeholders to help improve the lives of our clients. In HCA, that would mean working with our multidisciplinary team of nurses, doctors and other allied health professionals to support our patients and their families. At the same time, we may need to collaborate with the hospitals or other external institutions to help our patients and their families get the care that they need," said Paul.



8

HIGHLIGHTS OF THE 8TH SINGAPORE PALLIATIVE CARE CONFERENCE

The Singapore Palliative Care Conference (SPCC) is a biennial conference organised by SHC. The four-day event brought together a community of stakeholders in palliative care for a rich learning and networking experience. With the theme of Building Collaborative Communities, the conference aimed to encourage inclusivity, multidisciplinary teamwork, as well as open dialogue for learning in the field of palliative care among different disciplines in both inpatient and community settings.

1



Ready, Set, Take Off at the launch of the conference with an astonishing display of glowing butterfly kites floating above. Together, the audience released paper butterflies, signifying the exchange of ideas and knowledge to come.

DID YOU KNOW?

Butterflies represent transformation, hope, life and spirit. The essence of palliative care is embodied by butterflies' short yet purposeful life, not measured by time but meaning.



2

AN INSIDE LOOK AT OUR WORK

In collaboration with Assisi Hospice, Dover Park Hospice and Oasis@Outram (HCA Hospice), local and international delegates toured the facilities and learned from their experiences and stories in the palliative care field.



Participants waving to one of the beneficiaries at Oasis@Outram

Participants having an introductory talk at Dover Park Hospice



3

LAUNCH OF THE CYNTHIA GOH PALLIATIVE CARE INSTITUTE

Continuing the legacy of the late Professor Cynthia Goh, a pioneer of the palliative care movement in Singapore, the institute is dedicated to enhancing the quality of life for patients and their families, and strengthening palliative care capacity and capabilities in both Singapore and the Asia-Pacific region.

ANNOUNCEMENT OF THE 2023 NATIONAL STRATEGY FOR PALLIATIVE CARE (NSPC)

4



In his keynote address, the Guest of Honour, Minister for Health Mr Ong Ye Kung, unveiled national policies and plans to increase support for palliative care, smoothening care transitions, stronger financing support, expanding manpower and starting conversations early.



Scan
this QR code for
more information

The vision of the NSPC is to ensure that all Singaporeans, including their caregivers, have access to quality palliative care services delivered by trained professionals and supported by a conducive palliative care environment.



All our aspirations to better fulfil our loved ones' wishes can only be realised if we know what their wishes are."

MINISTER ONG YE KUNG



SHC LIVE WELL CHALLENGE 2023

Singapore Hospice Council (SHC) is excited to introduce the very first #SHCLiveWellChallenge, a virtual fundraising event encompassing cycling, running, and walking. SHC is committed to enhancing the lives of patients facing life-limiting illness and supporting their loved ones. Join us in our mission to raise \$100,000 for quality palliative care!

Participation is free. Sign up by 29 September with your family and friends to clock your distances for a good cause!



**Scan to
sign up**
for this challenge

5 A THOUGHT-PROVOKING ODYSSEY
Over 500 delegates registered for an exciting programme of plenaries and track sessions. Distinguished speakers and experts shared the latest findings and engaged in exciting discussions and exchange of valuable ideas.

6 EXPLORING A WORLD OF IDEAS
An exhibition of over 150 abstract posters showcased the latest research and heartfelt dedication of the palliative care community.



7 A NIGHT TO CELEBRATE THE GOOD WORK

Guests left with full hearts and bellies after an evening of delectable food, friendship and entertainment.



8 THE LEARNING CONTINUES
Participants explored more topics and gained new skills in various post-conference workshops.



Music therapist Tammy Lim (Assisi Hospice) demonstrates the power of music-making in palliative care

Our heartfelt thanks to all our speakers, moderators, exhibitors, sponsors, delegates and volunteers for making this conference possible!



SEE YOU AT SPCC 2026!



Scan to watch
the 2023 highlights video



Scan
to follow SPCC

BRINGING JOY AND COMFORT

Nurses involved in community care providing palliative home care share a patient's experience to highlight the importance of compassion.

In the area of palliative home care, the impact of compassionate community work cannot be overstated. As senior enrolled nurses, we are privileged to witness the profound influence we have on patients and their families, even within the constraints of time. Our recent encounter with Mr Tuam Kok Wah, a resident at Charis Manor Nursing Home, exemplifies the transformative power of simple gestures and empathetic care.

During one of our visits, we discovered that Mr Tuam's declining appetite had caused him to be isolated from his friends, who gather eagerly for meals. Recognising the importance of safeguarding each patient's preferences, we decided to delve into his cravings and food preferences. Mr Tuam expressed a longing for food such as char kway teow with cockles, pig trotters, and durian. We promised to bring these delicacies during our next visit, intending to bring him comfort and joy.

Arriving at Charis Manor the following week, we found Mr Tuam fully immersed in his favourite mukbang (eating show) on YouTube. The sight of him lying in bed, captivated by what he's watching, revealed his anticipation of our arrival. We uncovered the long-awaited pig trotters and durian which we brought, and the sheer delight that illuminated Mr Tuam's face will be forever etched in our memories. His unbridled enthusiasm and gratitude brought tears to our eyes. As he savoured every morsel of his beloved meal, we realised the transformative power of such simple acts of kindness. While Mr Tuam does get to enjoy his




Left: Singapore Cancer Society nurses sharing the joy with Mr Tuam Kok Wah

favourite pig trotters moderately which Charis Manor provides, it is not as often as he would like due to the dietary regime planned for him.

Mr Tuam's joy was not merely derived from the tastes he relished but also from the memories evoked by the pig trotters, one of many meals that his late wife used to prepare with love. In that precious moment, we were not just nurses providing palliative care; we became conduits of compassion, bridging past and present, and offering solace amid life's challenges. Experiences like this reaffirm the profound significance of a nurse's role in palliative home care. Although our time with each patient may be fleeting, the impact we make through acts of compassion is immeasurable. By going beyond medical tasks and recognising the unique preferences and desires of our patients, we can create meaningful connections and moments of joy, reminding them that they are valued individuals, not just recipients of care.

Our commitment to compassionate community work remains unwavering,

and our encounter with Mr Tuam highlights the transformative power of fulfilling a patient's desires, even within the confines of limited time. By embracing the individuality of each person under our care, we can create meaningful moments that alleviate suffering and enhance their overall well-being.

Compassionate community work in palliative home care transcends the boundaries of time, leaving a lasting impact on both patients and caregivers. As nurses, we understand that our role encompasses more than just medical care; it includes embracing the essence of human connection and enhancing the quality of life for those entrusted to our care. By cherishing moments of joy and personalising our approach, we can create a compassionate environment where patients feel seen, heard and valued until their final moments. Let us continue to embrace the spirit of compassion, weaving a tapestry of care and support for those entrusted to us in their final stages of life. 

Upcoming Events



LIVE WELL. LEAVE WELL. FESTIVAL 2023

Join us at the 10-day festival and discover what living before leaving means to you! Bring along your loved ones and deepen connections through interactive exhibits, exciting programmes and informative workshops.

Date: 13 – 22 October 2023
Venue: National Library Building, The Plaza Level 1
100 Victoria St, Singapore 188064

SHC "LIVE WELL. LEAVE WELL." EXHIBITION @ THE PUBLIC LIBRARIES

Visit our exhibition to find out more about palliative and hospice care, how to get started on end-of-life planning, and why die-logues are essential.

Date: Till 31 Oct
Venue: Bedok Public Library
11 Bedok North Street 1
Heartbeat@Bedok, Singapore 469662

Building



compassionate

communities

The increasing adoption of the compassionate community model in palliative care will require a whole-of-society change from the ground up that, ultimately, would mean all could live well and leave well at the end of life.

“It takes a village to raise a child” is a proverb of African origin that emphasises the communal effort required for the upbringing of a child. The same could be said of the all-in efforts and all-round resources required to take care of a person with terminal illness at the end of life.

Many think palliative care is the province of multidisciplinary care teams made up of doctors, nurses, medical social workers, dieticians and therapists, but the field has widened to include grassroots organisations, social service agencies, ethnic and religious groups, workplaces, neighbours, extended family members, friends, and the community at large, all of whom play important roles across different settings. They support those at end-of-life and their families through the progression of illness, death and bereavement.

This is an aspirational vision of what a compassionate community in action would look like.

Compassionate communities are part of a broader public health approach to palliative care and serve to improve access to services, increase the capacity of caregiving, raise death literacy, and boost social, emotional and spiritual support so as to enable many people at end-of-life the comfort and ease of dying at home surrounded by their nearest and dearest family and friends.

THE CIRCLE OF END-OF-LIFE CARE

It seems that caring for the dying is coming full circle.

In the 19th century, caring for the sick and dying was the responsibility of family or perhaps religious orders, because not much could be done to make them comfortable except emotional support, prayers, and

Right: The late Dr Cynthia Goh (left), Dr Anne Merriman (right) and the Sisters of St Joseph's Home attending to patients in 1987



basic care. With rapid advances in medicine, the rise of nursing as a profession, and the building of hospitals in the 20th century, caring for those at end-of-life took place in these institutions, shifting to medically trained professionals. In a way, it became more impersonal — ‘clinical’ has the meanings of both ‘emotionless’ and ‘disinterested’ — and people passed away in surroundings that were not of their own choosing.

Dame Cicely Saunders, credited with the birth of the modern-day hospice movement, initially served as a nurse before training as a physician. She researched pain management for those with life-limiting illness at St Joseph's Hospice in Hackney, East London, a Catholic hospice for destitute terminally ill patients.

She felt that end-of-life care left much to be desired, where patients spent their final days in hospitals in great distress due to inadequate pain relief, and emotional and spiritual neglect, even to the extent of abandonment. Dame Cicely's vision of palliative care embraced a person's “total pain”, including the physical, psychological, social and spiritual aspects, covered by a multidisciplinary team providing care at the end of life. In 1967, she realised her aspiration and founded the world's first modern hospice, St Christopher's Hospice, and it became the benchmark and inspiration for other hospices around the world.

Her famous words: “You matter because you are you, and you matter to the end of your life. We will do all we can not only to help you die

peacefully, but also to live until you die”, have been taken to heart by those who endeavour to uphold her legacy and spirit of palliative care since then. In her interaction with like-minded others who wanted to build similar hospices, Dame Cicely always advised that local culture and needs be taken into consideration.

The return of care, death and dying to the community drew from the World Health Organization's (WHO) First Global Conference on Health Promotion in Canada where the Ottawa Charter of 1986 paved the way for a new era in public health, one that would embrace health literacy and community engagement strategies because of the commitment to “accept the community as the essential voice in matters of its health, living conditions and well-being”.

The latest bridge — from institution back to community — which started the compassionate community movement in palliative care was in 2005, when the late Professor Allan Kellehear's seminal work, *Compassionate Cities: Public Health and End of Life Care*, not only defined compassionate communities but also mapped out how to build Compassionate Cities.

COMPASSION IN COMMUNITY

The vision of a compassionate community may be more attainable than we might think.

The most recent example of Singaporeans coming together for a common cause was during the COVID-19 pandemic. There was a groundswell of community initiatives that brought together ordinary Singaporeans, businesses and public

agencies to provide assistance to those in need. *The Straits Times* article “Community spirit among Singaporeans shines through during COVID-19 pandemic, says public sector report card” published in November 2022, stated over 13,000 volunteers signed up for various initiatives. According to the Head of Civil Service Leo Yip, it is this partnership between Singaporeans and the government, that is the light in the dark of this crisis, “It highlights Singaporeans’ strong spirit of care and concern for one another as well as how working together has enabled us to serve those in need and overcome this crisis as one.”

This spirit of voluntary action, as well as philanthropy, has been part of Singapore's heritage since the beginnings of this island city-state. While the building of healthcare facilities was mostly financed by philanthropists, communities were nurtured along geographical, social and cultural lines, that provided support networks for those newly arrived and in need.

However, care for the death and dying, especially of the destitute, was neglected due to its taboo nature. The notorious Chinese “death houses” that lined Sago Lane reflected no dignity nor respect for the dying — a shadow that remains in the minds of older Singaporeans. When they were shut down for good in 1961, the process of dying moved away from the community into hospitals.

The first hospice service in Singapore was offered by St Joseph's Home in 1985, an extension to the shelter for the aged and destitute they have been providing since 1978. This inpatient hospice set aside an initial 16 beds for those with “advanced illness”, and served as the starting point for many Singaporeans to volunteer in the fledgling palliative care field.

The hospice movement continued to grow in the decades that followed with the opening of Assisi Hospice, HCA Hospice, Singapore Cancer Society, MWS Home Care & Home Hospice, Dover Park Hospice, and others, helmed by dedicated volunteer healthcare professionals.

“ONE OF THE CONTRIBUTIONS THAT THE COMPASSIONATE COMMUNITY MOVEMENT CAN MAKE IS TO REMIND EVERY CITIZEN THEY HAVE A ROLE TO PLAY WHEN SOMEONE IS DYING, CARING OR GRIEVING.”

DR KERRIE NOONAN

STRONGER TOGETHER

What encompasses a compassionate community may not be clear-cut to some but Dr Kerrie Noonan, a clinical psychologist and social researcher who has been promoting death literacy for the last 25 years, described it as “formal and informal networks coming together to support dying people and their families”.

To Dr Noonan, these networks could be fluid depending on the context. “Sometimes, groups are formed to care for someone who is dying, and other times, people gather to work on initiatives that help make their spaces more compassionate for those who are caring, dying or grieving.”

Dr Katie Eastman, who is founder and CEO of Children's Palliative Care Community (CPCC) and also Adjunct Professor at Antioch University, USA spoke about “Applying the Compassionate Community Model at the Individual, Organisational and Systemic Level” at St Luke Hospital's inaugural Palliative Care Symposium 2022.

She shared an example of a community collaborating to ensure that a terminally ill child and his family residing on an island could get the additional support for them to remain at home. “The local grocery, ferry staff, faith community, friends and neighbours, essentially the island residents formed their own team. The visiting nurses met with him regularly, communicating his needs to our palliative care team, and our physician worked very closely with the island physician to check on his symptoms. Medicine was transported via the ferry as


needed. He was kept comfortable and able to remain on the island for a little over a year until his death.”

THE FUTURE LOOKS BRIGHT

In recent decades, there has been increased activism among the youth in Singapore. as shown by Project Gift of Song (page 20), and Pallipals by medical students from Lee Kong Chian School of Medicine at National Technological University, Singapore who mainly befriend palliative care patients at Tan Tock Seng Hospital. These youth activists “engage the patients in activities such as board games, arts and crafts, reading and singing performances”, as well as organise information outreach events to raise awareness on palliative care among the public as well as fellow medical students.

On 8 July 2023, Singapore Hospice Council's (SHC) Leaders Forum convened with leaders of local community networks and groups to explore ways to increase death literacy in the population (page 22).

“I am optimistic about the compassion and care that already exists within our communities. One of the contributions that the compassionate community movement can make is to remind every citizen they have a role to play when someone is dying, caring or grieving,” said Dr Noonan.

Whether becoming part of an existing compassionate community or building one in order to address a care gap, everyone can make a difference, and the positive outcome generated will be one that is greater than the sum of their parts. 



CHANNELLING YOUR COMPASSION

1

Be attentive to those around you and extend a helping hand to family, friends and neighbours in need.

2

Get involved and volunteer with SHC and be part of the collective voice to champion quality palliative care. Spearhead the death literacy effort at work or school, and invite SHC to conduct a Palliative Care 101 course in your community.

3

Enhance your understanding of end-of-life matters by accessing resources, attending webinars and visiting SHC at roadshows; follow SHC on social media for the latest information and updates.



Left: A WH Senior ACP Coordinator conducting an ACP outreach talk at Care Corner Active Ageing Centre; Opposite page: WH ACP team and Health Coaches engaging with seniors from Care Corner Active Ageing Centre in small groups using Conversation Cards

FROM THE GROUND UP

While the impact of grassroots efforts to grow compassionate communities hasn't been measured, Woodlands Health recognises the importance of collaboration to grow this social change movement.

The term 'compassionate communities' was described by Dr Allan Kellehear in the mid-2000s as "naturally occurring networks of support in neighbourhoods and communities, surrounding those experiencing death, dying, caregiving, loss and bereavement". These are groups that the public can be a part of, become more informed about death, dying, and care, and adapt their practices and behaviours to support those at the end of life.

The concept of compassionate communities is a powerful paradigm that aims to reverse the medicalisation that characterises dying in the 21st century and bring the process of dying and death back into society and into life. Over the last two decades, hundreds of

compassionate communities have flourished in different parts of the world.

Singapore is in the beginning stages of fostering a compassionate community as a grassroots movement. In the last decade, a number of advocacy groups, campaigns and programmes have mushroomed. These include the campaigns "Dying to Talk" and "Living Wishes" by students of Nanyang Technological University Singapore (NTU) to encourage people to have dinner table conversations with loved ones about death at home. There are also groups such as Project Happy Apples by medical students of National University of Singapore Yong Loo Lin School of Medicine to raise awareness of palliative care and early planning,

Project Gift of Song by medical students of NTU Lee Kong Chian School of Medicine using music as a medium in community engagement, Both Sides Now by ArtsWok Collaborative which develops arts-based and capability development projects to foster awareness of living and leaving well, to name a few. Charities such as the Singapore Hospice Council have organised large-scale community engagement efforts to raise awareness of palliative care and the importance of early planning.

The jury is out as to the widespread and sustainable impact of the various grassroots efforts, however.

"Compassion in healthcare: an updated scoping of the literature" by Sydney Malenfant, Priya Jaggi, K Alix

"DEATH IS NOT THE OPPOSITE OF LIFE, BUT A PART OF IT."

AUTHOR HARUKI MURAKAMI

Hayden and Shane Sinclair published in peer-review journal *BMC Palliative Care* in 2022 concluded that global strategies tended to focus on increasing personal literacy and skills through awareness and education outreach. Few focused on community activation and the creation of health-promoting public policies in palliative care. When analysis of outcomes was performed, evaluation was mainly at the level of the individual and not at the level of community processes and outcomes.


In the last year, two workshops were conducted in Singapore on compassionate communities. The first was led by Dr Katie Eastman at the St Luke's Hospital Palliative Care Symposium in November 2022 while the second was led by Dr Heather Richardson, Dr Kerrie Noonan and Dr Amy Chow at the 8th International Conference on Advance Care Planning in May 2023. The workshops were illuminating and shared about applying the

compassionate community model at the individual, organisational and systemic level as well as utilising precepts espoused by the International Association for Public Participation to move the needle of engagement from merely informing the public about end-of-life matters to consulting, involving and collaborating with the community. The highest ideal of community engagement is to empower; that is, for agency to rest with the community while professionals in the "death systems" (late-Professor Robert Kastenbaum, 1988) support these community-led initiatives.

Should we have a top-down or bottom-up approach to compassionate communities? My conviction is that a whole-of-society approach is required. While the impetus is strong and grassroots activities have proliferated, we need a coordinated response to socialise death and dying, and to bring death back into life. Besides media campaigns, other initiatives may include targeted outreach as well as policy changes to nudge people towards the new "health-promoting palliative care" paradigm in the national initiative Healthier SG launched by the Ministry of Health Singapore in 2022. Over the next few years, Singaporeans will hear about the "Pre-Planning Campaign" fronted by Agency for Integrated Care (AIC) to promote more Advance Care Planning (ACP) and Lasting Power of Attorney (LPA) as well as the Singapore Hospice Council's "Ambassador Programme" and "Community Signposts" initiatives which aim to increase awareness of palliative care in the community.

As fledgling services, the Palliative and Supportive Care

and ACP teams of Woodlands Health (WH) are starting from the ground up and have begun direct engagement with community stakeholders such as Care Corner Singapore, Orange Valley, AWWA, Sree Narayana Mission, Singapore Cancer Society, Republic Polytechnic and Christchurch Secondary School. The response has been very positive. Contrary to popular belief, our anecdotal experience is that community partners and the public value opportunities to discuss issues related to death and dying in life-affirming and practical ways. We use videos and slides as well as pop-up booths and card games to educate people about positive responses to death and dying, and how we should prepare ourselves. In these workshops, some elders expressed interest to have further conversations with ACP facilitators. To share the work of community engagement, we are building a pool of staff volunteers of nurses, doctors, social workers and other allied health professionals. To connect with the people whom we serve in the community, we need to go out into the community and take time and effort to build trust and relationships.

As a topic, death is often swept under the carpet as a bane, and an emblem of ultimate loss and failure. However, death has immense value as a part of life, a natural event, and an immutable fact of life that is to be embraced, understood, and prepared for. As a social change movement, the compassionate communities movement aspires to raise death literacy and community activation towards death, dying, caregiving, loss and bereavement. In spite of the modern-day palliative care movement, sometimes it is still 'too little, too late' when it comes to addressing ignorance and social inequities in dying. Through reviving connections and community as a proactive response to dying, the compassionate community paradigm hopes to bring death back into life. In our universal endeavour to promote kindness, caring, and human dignity, it is all hands on deck. 



WORDS DR RAYMOND NG, HEAD AND SENIOR CONSULTANT, PALLIATIVE AND SUPPORTIVE CARE, WOODLANDS HEALTH PHOTOS CARE CORNER SINGAPORE



PUT A PAW UP FOR FURRY COMFORT

They say dogs are Man's best friend. So what could be better than being on a journey with your best friend while giving to those in greater need?

Onyx and I have been a therapy dog team duo for eight years. For the first two, we volunteered alongside other handlers and therapy dogs, providing dog therapy to folks in need. We visited nursing homes, hospitals and schools.

In our third year of service, I wanted to try working on our own. The reasons were simple. Working by ourselves would mean better conversations with patients and focusing on their needs. I wanted to serve in a more patient-focused setting.

Around the same time, I also noticed changes in Onyx. While he had always possessed a calm demeanour since he was a puppy, he now exuded a more sensitive disposition and revealed a gentler side when he senses someone is in discomfort or pain.

We were at a funeral, paying our last respects to a friend's mother. Many of Onyx's friends were there too but instead of going to them for pats and cuddles, he kept trying to pull me over to a corner, where an elderly man was sitting on his

own. I later found out he was the husband of the deceased. Witnessing his acts of empathy gave me the confidence to try and work with patients in palliative care.

Onyx is a wonderful ice-breaker. With him around, I never have to worry about how to keep a conversation going with total strangers. He does all the work! When he enters a room, gasps of happiness from patients and caregivers fill the air. That gives me a warm and fuzzy feeling,

and it's also an affirmation for us to continue what we are doing.

I have had the privilege to get to know some of the most courageous patients, and seen a lot of things that have greatly touched me. Many a time, it gets difficult to know that the hand you hold today may not be there tomorrow. It happens so frequently, yet one can never truly get used to it. Managing my expectations is something I have had to learn.

Entering a room and seeing an empty bed, instead of the patient you saw last week is a common occurrence. At moments like that, I take a second to remind myself that we have done what we set out to do, and brought the patient comfort, even if it was for just a few moments.

One day, we received a call from the volunteer manager. We were told of a patient's last wish — he wanted to spend time with Onyx. When I heard it, I was touched, honoured and overwhelmed by my feelings. I mean, how do you feel when you hear that someone's last wish was to spend time with your pet? Life doesn't prepare you for that.

We made arrangements to go down and see Uncle T. I placed Onyx

on the bed with him and on a few occasions, stepped back so the two of them could spend some time alone.

Uncle T doesn't talk much but he shared with me the name of his late dog and said she was affectionately spoiled ('manja' was the word he used) like Onyx. He had a twinkle in his eyes.

When it was time for us to go, he looked straight at me and said, "Thank you very much." I held his hand and told him, "Thank you for loving Onyx."

Uncle T passed on the next day. Another memorable patient we journeyed with was Madam L. She


HERE'S A LITTLE SOMETHING FROM ONYX'S POV

Hi, I'm Onyx! It doesn't take much to make a difference in someone's life. A smile, a pat on the shoulder, or a hug. Sometimes, even sitting in the same room without saying a single word can mean so much. When you truly give without expecting anything in return, you feel the lightest, and happiest. Smile at a stranger today. No, in fact, smile at 10 strangers today!



doesn't remember my name, or the names of the nurses, doctors or therapists who visit her. The only name she remembers is Onyx's.

I am very grateful for the chance to do what we do. It is a privilege. And every extra minute we get to spend with the patient is a bonus.

This journey has been crazy, sad, rewarding, and so, so fulfilling. Nothing short of a rollercoaster ride, and you know what? I can't wait to do it all over again. 

Follow Onyx's meaningful journey with end-of-life patients at facebook.com/onyxbaby

"WHEN ONYX ENTERS A ROOM, GASPS OF HAPPINESS FROM PATIENTS AND CAREGIVERS FILL THE AIR. THAT GIVES ME A WARM AND FUZZY FEELING, AND IT'S ALSO AN AFFIRMATION FOR US TO CONTINUE WHAT WE ARE DOING."



CAPTURING THE HEART OF PALLIATIVE CARE


Step into a world of warmth, love, and profound human connection as we showcase the winning photographs and celebrate the unwavering commitment of palliative healthcare providers.



Singapore Hospice Council's (SHC) inaugural photo competition with the evocative theme of "Courage to Care", held in conjunction with the 8th Singapore Palliative Care Conference (SPCC 2023), aimed to recognise the courage, dedication, and compassion of palliative healthcare professionals.

With submissions from local and international participants, the competition showcased the vital work and impact of palliative care. Judged on originality, creativity, and relevance to the theme, five winners were chosen, each presenting a unique story of courage and care. The winners attended the SPCC 2023 Conference Dinner on 1 July and received their combined prize of cash and dining vouchers worth up to \$500 during the presentation ceremony.

The winning entries were displayed at the Conference Dinner and guests in attendance had the opportunity to vote for the Most Popular photo from among the five winners. The results were indeed close, with the winning photo of the Most Inspiring category selected as the audience's favourite. We thank all participants for their submissions, which remind us of the warmth, love and resilience prevalent in palliative care.

We hope that the images and stories shared by the winners will continue to inspire and remind us all of the indomitable spirit of care and service that continues to thrive in the hearts of palliative care professionals worldwide. 



- 1 Dr Amrita Shrestha and her husband, Dr Suraj Maharjan
- 2 Dr Kinley Bhuti
- 3 Ms Manju BK
- 4 SHC Board Member Mr Adrian Peh (right) presents Ms Toh Wei Shi her prize



Scan to view
all photo submissions
and more!



Find out more!
Dr Kinley Bhuti shares
the story behind her
winning photograph

WORDS & PHOTOS: SINGAPORE HOSPICE COUNCIL

MOST INSPIRING & MOST POPULAR

By Dr Kinley Bhuti

Clinical Fellow, Division of Supportive and Palliative Care,
National Cancer Centre Singapore



MOST HEARTWARMING

By Dr Amrita Shrestha

Consultant Paediatrician, Palliative Care and Chronic Disease,
Green Pastures Hospital and Rehabilitation Centre, Nepal



MOST COLOURFUL

By Wong Yat Yen

Nurse, Tan Tock Seng Hospital, Singapore



MOST COURAGEOUS

By Manju BK

Nurse, Palliative Care & Chronic Disease Department,
INF Nepal Green Pasture Hospital, Nepal



MOST CREATIVE

By Toh Wei Shi

Brand & Content Specialist, Communications,
HCA Hospice Singapore



SPEAKING FROM A POSITION OF CARE

Professor Meera Agar is a practicing palliative medicine physician, with a particular interest in the supportive care needs of people suffering from advanced illness on the brain. This past July, she was a speaker at the 8th Singapore Palliative Care Conference and shared her experience.

How did you get started in palliative care?

While I was doing my internal medicine training in Sydney, I had a serendipitous opportunity to do a term in palliative care. I had always been interested in both oncology and geriatrics so it was the synergy between these that I found in palliative medicine. I also had a personal connection with the head of the Palliative Care Department, Professor Ghauri Aggarwal — she was my Bharata Natyam dance teacher when I was a little girl!

What do you think is the biggest misconception people have about palliative care?

I would say that the biggest misconception about palliative care is that it is about dying, when in fact it is about living well. There is also the assumption that it is only for the last hours or days of life when it is so much more. Many also think it is only for people affected by cancer. I think health professionals often hold many of the same misperceptions as the community; after all, our experience of death and dying is very much shaped by our own personal experiences and attitudes.

Do you think palliative care should be part of primary healthcare?

What would be the most significant benefit?

Most people under palliative care wish to die at home. In this context, it is a no-brainer that primary care is critical to the provision of high

quality palliative care. The benefits are significant: we can meet people's preferences with proactive and preventative care, and avoid acute care which is distressing for people and is not an optimal use of resources.

As someone in the end-of-life care field, do you find talking about death and dying matters easier?

I would say I am comfortable with having these conversations, feel confident I have received training to do my best at having these conversations and place an immense importance on the value of them. I am not sure I would use the word easier. Each individual conversation you have with people who are dying and their families is unique and takes you somewhere new. They all require individual attention and energy, and I always feel like I learn something new.

A colleague who was trained in primary care before training in palliative medicine told me about the time she took some medical students on a community visit who were perturbed about a very ill person who wasn't being immediately transferred to hospital. She replied that it was for that exact reason that they should remain at home if that was their wish.

It always reminds me to ensure our

junior colleagues are allowed the opportunity to witness people have as many as these conversations as possible so they can build their own unique and authentic way to do them well also.

As Board Chair of Palliative Care Australia, how do you encourage more dialogue?

At Palliative Care Australia, we regularly engage in community campaigns and initiatives to equip more Australians to have discussions about palliative care and end-of-life. Our most recent is the More Than You Think campaign. We use animation to allow people to feel comfortable exploring the topic which was then broadcasted on mainstream media across the country.



Left and top: Prof Meera Agar speaking at the 8th Singapore Palliative Care Conference 2023



As a leader in palliative care, how do you achieve your goals of promoting palliative care?

At the beginning of my career, it was very much about advocating for palliative care for individual patients and their families. Over time, I have realised the importance of the promotion of palliative care at governmental and policy levels, and that we need research that translates into practice to achieve equitable and better outcomes for all. My approach has always been to try to work out the stumbling block for a person, another clinician or a political stakeholder, not to engage with palliative care, so you can present the case through their lens. A strengths-based approach rather than direct provocation can get even the most resistant clinician onside! As a researcher, using data and evidence has also

opened up conversations with my clinician colleagues.


What advice do you have for caregivers contemplating palliative care for their loved ones?

Validating how important the caregiver role is, and also that care for them is as important as care for the person with the palliative condition. I also try to remind people to alert care teams to emerging issues early — caregivers often don't want to 'disturb' the nurses or think their issues are trivial, but if they understand that we can respond more easily, they then feel more confident in being partners in care with us. Facilitating conversation between the caregiver and their loved one is also so important; sometimes, caregivers need some guidance on how to approach these important conversations.

What is your vision for the integration of palliative care into community settings?

At Palliative Care Australia, we see a world where quality palliative care is available for all, when and where they need it. This requires a vision for accessible care, which can be rapidly mobilised and adjusted as needs change. It requires healthcare to work in partnership with social care and communities, and governments who value informal carers and care in the community. Everyone has a place in helping us deliver this vision, whether through funding, working or advocating for community initiatives, asking about palliative care for yourself or your loved one, having a conversation with loved ones about your end-of-life wishes or undertaking more training to improve your own clinical skills.

Has your work in end-of-life care changed your perspective on life?

It reminds me that we don't ever fully know what might be happening in someone's life, and to try to approach all conflicts with kindness. As an introverted person, it has made me speak up and share the voice of the people I have been privileged to care for. I don't think I would ever have voluntarily put my hand up for a media interview two decades ago! 

“THE BIGGEST MISCONCEPTION ABOUT PALLIATIVE CARE IS THAT IT IS ABOUT DYING, WHEN IN FACT IT IS ABOUT LIVING WELL.”



Left: Our volunteer performers and emcees at Dover Park Hospice following an interactive singalong session with the daycare service users for Christmas last year; Below: Project Gift of Song volunteers with Minister for Health Mr Ong Ye Kung at the Singapore Palliative Care Conference 2023; Opposite page: Participants from Project Gift of Song and LKCMedicine Pallipals with Singapore Hospice Council Executive Director Ms Sim Bee Hia and Board Member Dr Mervyn Koh at a SHC Palliative Care 101 session in February 2023



“Only 14?” My volunteers and I exchanged small smiles as the Minister for Health Mr Ong Ye Kung tried to guess the age of our youngest volunteer. At the kind invitation of the Singapore Hospice Council (SHC), we had the opportunity to set up a booth at the 8th Singapore Palliative Care Conference (SPCC) in July, which Minister Ong had graced as the Guest-of-Honour.

We explained that Project Gift of Song (PGoS) comprises youth volunteers across Singapore, ranging from secondary school students to university graduates.

This was not the first time that our volunteers’ youth caught others by surprise. Many were curious about our motivations to champion end-of-life care at such young ages. Others marvelled at the size of our organisation — now 80-strong with representation from seven institutions. PGoS is now a far cry from our humble origins as a passion project started out by six friends at the height of the COVID-19 pandemic at the end of 2020. We had been inspired to harness our shared enthusiasm for music to give back to the community after witnessing how it united people globally during times of uncertainty.

THE COMFORT OF MUSIC

Founder Loh Pei Yi reflects on Project Gift of Song’s journey to celebrate life and embrace mortality through building compassionate communities at the intersection of music and terminal illness.

Our venture into palliative care was perhaps a decision of serendipity — I had chanced upon a news feature about Ambulance Wish Singapore (AWS) granting the final wishes of patients nearing end-of-life. Furthermore, we were appalled by findings from a Ministry of Health report, which revealed that our final ten years of life would be spent in illness and disability despite Singapore’s world-class healthcare system. This cemented our desire to explore the intersections between music and terminal illness, by leveraging the solace music brings to maximise healthspan in our rapidly ageing society. With generous support from the Young ChangeMakers Grant, we embarked on a fundraiser in support of AWS and to raise awareness of end-of-life care. Through merchandise sales, e-waste collection, and a virtual charity concert, we have successfully raised \$7,012.80 to date, including 108kg of e-waste collected.

As part of our partnership with AWS, our volunteers had the opportunity to learn from the life experiences of a beneficiary’s spouse. A particularly touching lesson was to be vocal in expressing appreciation for our loved ones, before it was too late. We also learnt about Singapore’s palliative care movement through preparations for the SPCC 2021 closing ceremony. Putting together historical images from SHC’s Commemorative Handbook, our volunteers arranged and performed “Our Hospice Story” alongside Dr Jamie Zhou, who wrote

WE BELIEVE SINGAPORE’S YOUTH ARE HARBINGERS OF THE FUTURE THAT WE ENVISION, WHERE SENIORS CAN LIVE WELL AND LEAVE WELL.


the song as a tribute to the pioneers of palliative care in Singapore.

We also learned more about the therapeutic use of music in healthcare. After reaching out to the Association of Music Therapy (Singapore), our volunteers conducted a music-for-wellness workshop for the public with the advice of palliative music therapist Ms Tammy Lim. Although the themes were very broad, a participant ended up spontaneously writing a song about loss; this underscored how music provided avenues for Singaporeans to express vulnerability about personal matters such as life and mortality.

These encounters and reflections empowered PGoS with the courage to explore the path less travelled, eventually discovering our identity in celebrating life and embracing mortality with the comfort of music. We engaged with the daycare hospice community in interactive music sessions and is developing a community-led approach for individuals to leave a legacy with music. We aspire

to leverage music to facilitate conversations on end-of-life matters. Currently, our volunteers spearhead heart-to-heart conversations on end-of-life dilemmas and preferences. We also equip our volunteers with knowledge on music and end-of-life matters, from palliative care and Advance Care Planning to mindful compassion.

PGoS’ partnership with SHC has provided us with valuable resources and opportunities along the way. Working together with Pallipals, a local Community Involvement Project by Lee Kong Chian School of Medicine (LKCMedicine) at Nanyang Technological University, Singapore, we jointly invited SHC to conduct a Palliative Care 101 course with a special sharing segment by SHC Board Member Dr Mervyn Koh. We were also honoured to join the recent Leaders Forum as part of a series of national conversations on raising death literacy and awareness of palliative care, and are profoundly excited for further community engagement opportunities in collaboration with SHC. It is also our greatest privilege to be working closely with SHC member organisations such as Dover Park Hospice and Assisi Hospice; as well as the Agency for Integrated Care.

We believe Singapore’s youth are harbingers of the future that we envision, where seniors can live well and leave well. I would like to express my sincere appreciation to our volunteers past and present, mentors, and partners who believed in us, encouraged us and contributed to our cause in various ways. Your support means a lot to us as we collectively pursue our cause, one gift of song at a time. 



WORDS LOH PEI YI PHOTOS PROJECT GIFT OF SONG

LEADERS FORUM: LIFE AND DEATH MATTERS

Singapore Hospice Council's inaugural forum discussion on normalising end-of-life conversations and raising death literacy welcomed by the community.

Clockwise from top left: The panel features (left to right) veteran palliative care social worker Ms Chee Wai Yee, moderator Ms Carine Ang and SHC Executive Director, Ms Sim Bee Hia; Representatives from each organisation shared their personal experiences and discussed ways to normalise end-of-life conversations

On 8 July, Singapore Hospice Council (SHC) organised the inaugural “Leaders Forum – Life and Death Matters” in conjunction with the 8th Singapore Palliative Care Conference. This event aimed to encourage open, inclusive conversations about end-of-life matters and promote understanding and awareness of death literacy. Death literacy is a practical set of knowledge, experience, and skills one uses to make informed choices about end-of-life and death care options.

Leaders helming ethnic and religious groups, youth groups and social service agencies convened to discuss perspectives and explore opportunities to influence change and encourage end-of-life conversations within their respective communities. Representatives from The Eurasian Association, Bukit Batok East CCC, Al-Muttaqin Mosque, Singapore Buddhist

Federation, among others, discussed the following key points.

HAVING THE CONVERSATION

Having conversations about death and dying is essential, as only through open discussion can we start to deal with it. Avoiding the topic can lead to unmet wishes and conflicts when instructions are unclear. Engaging in conversations early allows planning for unexpected events and making informed decisions. These discussions can also help us cherish life, gain support from loved ones and address important matters such as: preferred care, illness concerns, living well, family, and how we wish to be remembered. Practical issues like business, bills, and estate planning are also essential topics.

Collective efforts to start intentional die-logues will contribute to a death-literate community that is confident and well-prepared to handle matters relating to death and dying and to support caregivers and individuals with life-limiting illnesses.

So, when is a good time to talk about end-of-life matters? It would be now.

EMPOWERING THE COMMUNITY

Fostering a culture of openness and compassion within the community is important for people to feel comfortable to engage in such essential die-logues. Community support is crucial as matters of life and death are inextricably linked to each individual's personal background and social network. Traditions and rituals pertaining to death and dying,

WORDS & PHOTOS SINGAPORE HOSPICE COUNCIL



people on death and dying. Available resources include books and guides, videos, programmes, workshops, and more. These offer practical information, advice and assistance to elevate an individual's death literacy. “After we attended the Palliative Care 101 course by SHC, we thought this is a really good way for us to introduce this topic to people our age,” said Ms Low Yi Ker, a student at Raffles Institution.

CONNECTING COMPASSIONATE COMMUNITIES

This forum is the first in a series aiming to engage and facilitate discussions among leaders and stakeholders across various sectors. “I appreciate today's sharing to prepare leaders like us so that we can prepare our people,” said the Venerable Shi Jian Xin from Singapore Buddhist Federation. As Singapore is projected to become a super-aged society by 2026, SHC believes that it is critical to raise the national death literacy level, collaborate with communities to empower individuals to make informed decisions and approach the end of life with dignity and compassion. 

concepts of the afterlife, and how we remember the dead are familiar and can be perfect conversation starters within tightly knit local circles. Questions on how we might better prepare our community to engage in die-logues and support each other in death and dying matters were raised and explored during the session. Dying is a relational and spiritual process. As the end draws near, patients and their family typically seek out their religious leaders to come to terms with death and dying. “When we visit them, I think it is important for us to know how to help ease them through the process,” said Mr Chung Kwang Tong, President, Quan Zhen Cultural Society (Singapore).

Community leaders can serve as initiators and facilitators for end-of-life conversations, and advocate for early planning. Organisations are

already doing so via programmes such as Parting Words by City Harvest Community Services Association (CHCSA) and Good to Go by AMKFSC Community Services. However, Mr Kenny Low, Executive Director of CHCSA remarked that “death planning is something we need to do better, we have to be a bit more intentional about it.” Dr Terence Yow, Division Director, Care & Integration Division, AMKFSC Community Services, echoed similar sentiments, “Many [of our members] are not very literate [on death matters], in fact many of them avoid talking about it and hence it really is [about] opening up that space for people to come together to talk about it.”

In addition, the session highlighted the plethora of existing resources and how they can be used to fill knowledge gaps and educate



Scan to watch
highlights from the
Leaders Forum

“I APPLAUD SHC FOR HOLDING THIS OPEN FORUM WITH COMMUNITY LEADERS, WITH MANY OF US LEARNING OF OPPORTUNITIES TO ENGAGE THE COMMUNITY.”

MR BIREN DESAI (SINGAPORE GUJARATI SOCIETY)

COMPASSION IN COLLABORATION

Have you ever considered what it takes to deliver *The Hospice Link* to your doorstep? Every quarter, about 30 beneficiaries from the Movement for the Intellectually Disabled of Singapore (MINDS) Eunus Training & Development Centre (ETDC) carefully assemble each mailing packet to bring you the latest edition of this newsletter.

Since 2021, this partnership has been one of ETDC's many initiatives that helps their trainees explore and learn new work-related skills. Under the guidance of Training Officers (TOs), trainees participate in tasks like packing newsletters into envelopes, affixing address labels, and sticking stamps. This project not only develops their fine motor skills but also simulates work and productivity tasks, cultivating a sense of independence and purpose for trainees when they get to see a finished product.

MINDS advocates for a compassionate and client-centred approach when working with beneficiaries, catering to each trainee's individual strengths, and creating opportunities to develop their potential. Keziah, a TO at ETDC, highlights that such collaborations "allow organisations and the community to see that our trainees have great potential when given a task or activity that is specifically and individually catered to their needs, matching their level of understanding."

To expand community outreach, the Singapore Hospice Council (SHC) has added more than 1,600 General Practitioner clinics to the newsletter's distribution network. To facilitate this, SHC extended its collaboration with MINDS to include the Tampines Training & Development Centre (TTDC). We hope to inspire other individuals and organisations to embrace inclusivity and a more compassionate community for all.



Trainees (from left to right) Tay Meng Huat, Lee Yi Fen and Chang Shu Qiang carry out various assigned tasks



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