

***“Let us hold fast the confession of our hope without
wavering, for He who promised is faithful.”***

Hebrews 10:23



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ASSISI HOSPICE | ANNUAL REPORT 2021

STEADFAST IN CARING

ANNUAL REPORT 2021



FRANCISCAN VALUES

FRANCISCAN VALUES

Assisi Hospice was established in 1969 by the Franciscan Missionaries of the Divine Motherhood. We dedicate our efforts to providing palliative care for all who are vulnerable. Our guiding principles in caring for the sick and the poor take root in Franciscan values, as lived by our Patron Saint, St Francis of Assisi.

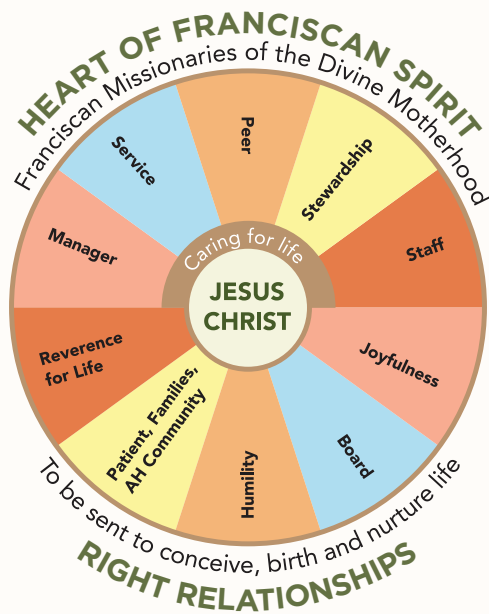
Francis was the son of a wealthy merchant, but he gave up his life of luxury to follow God’s calling to lead a life of brotherly love and peace, caring for the poor, the sick and the marginalised. He loved nature and revered all forms of life as God’s creation.

At Assisi we emulate the example set by our Patron Saint in serving all who need our care, with humility and joy, treating everyone with respect and compassion.

We care not only for our patients, but also their families, to provide support for their physical, emotional, psychosocial and spiritual needs. We welcome people of all faiths, age, race and financial position. No one will ever be denied of our care because of who they are or what they can afford.

The life and teachings of St Francis have much relevance to us at Assisi, as we come face-to face with diverse individuals from all walks of life, who need our support, love and care.

May we continue to serve this mission in the spirit of St Francis as we live out his prayer:



THE PRAYER OF SAINT FRANCIS

*Lord, make me an instrument of Thy Peace.
Where there is hatred, let me sow love
Where there is injury, pardon
Where there is doubt, faith
Where there is despair, hope
Where there is darkness, light, and
Where there is sadness, joy.
Oh Divine Master,
grant that I may not so much seek
to be consoled as to console
to be understood as to understand
to be loved as to love.
For it is in giving that we receive
It is in pardoning that we are pardoned,
and it is in dying that we are born to Eternal Life.*



CONTENTS



1	Franciscan Values	17	Helping the Needy
3	Our Vision, Mission & Service Values	18	Patient Profile
4	Message From Sister Jane	20	Perseverance
6	Message From the Chairman	32	Reverence For Life
8	Message From the CEO	38	Joyfulness
10	Board of Directors	44	Gifting Presence
12	Management Team	48	Growth
13	A Tribute to Professor Cynthia Goh	52	Hand in Hand
14	Board Committees 2021	57	Financial Statements
16	Governance Report		



OUR PATRON

Ms Ho Ching

OUR VISION

To be the Leader and Centre of Excellence for Compassionate and Personalised Palliative Care.

OUR MISSION

The Assisi Hospice is a Catholic charity providing compassionate, personalised and quality palliative care to adults and children with life-limiting illnesses through our inpatient, home and day care services.

OUR SERVICE VALUES



REVERENCE FOR LIFE

We cherish life and respond to all beings with respect and compassion, by enhancing and preserving the dignity of all beings throughout life, and at its natural cessation in death.



STEWARDSHIP

We manage the resources and relationships that are entrusted upon us wisely, fairly and responsibly by allocating our resources to serve those most in need.



JOYFULNESS

We rejoice in life and all the experiences that each day brings by sharing joyfulness with our patients, their families, and anyone in touch with the Hospice.



HUMILITY

We employ our skills, opportunities and talents humbly in the service of our fellow beings by improving ourselves as individuals and as a team to serve others better.



SERVICE

We accept our positions as servants to those who are in need of our care by providing a healing experience, in an environment that is comfortable, welcoming and assuring.

MESSAGE FROM SISTER JANE

Congregational Leader
Franciscan Missionaries of the
Divine Motherhood

As I was reflecting on what I wanted to say which would, in some small way, capture the extraordinary gift Assisi Hospice is to the community of Singapore, I tracked down one of my favourite reflections from the Australian poet Noel Davis:



Holy Trust
When all is pondered said and done
written down and bound
we can but trust in life with all our hearts
and entrust our world and each other
to the Heart of Love
and live each moment as it comes



I experience Assisi Hospice's amazing threads of connection, traversing through time and space, to patients, families, volunteers, benefactors and countless others who are touched by the spirit of Assisi.

For me, this exemplifies what the whole team in Assisi offers through their professional, compassionate, creative, collaborative ministry which flows from hearts that put life, respect, dignity and love before anything else.

We know that it is in times of struggle and uncertainty that we need to dig deep and draw on the resources which have embedded themselves deep in our individual and collective psyche. For over 50 years Assisi has been growing and deepening its call to live St Francis of Assisi's vision of peace, respect, joyfulness and reverence for life.

In the early days the FMDM sisters lived this Franciscan vision from the heart of their vocational calling. Today, when the FMDM sisters play a much-reduced active role (their prayer support is

as strong as ever!), it is wonderful to see this vision being taken on and expressed so strongly and visibly by our partners in mission who have chosen to bring all their professional skills and life experience to this Franciscan Mission lived out through Assisi Hospice.

The fruit of this growth has been shown so clearly over these last 2 years when every aspect of our lives and therefore our care for the most vulnerable and their families has been changed and the call to respond has asked much of every person. Even though I am on the other side of the world, I experience Assisi Hospice's amazing threads of connection, traversing through time and space, to patients, families, volunteers, benefactors and countless others who are touched by the spirit of Assisi. Although we know we are carried by prayer and good will, there is also the hard work, selfless commitment, generosity of spirit of the Board, Management and every member of team Assisi. On behalf of FMDM sisters across the world I offer a heartfelt thank you for the inspiration and witness you give to us and assure you of our prayerful support of this ministry so dear to the heart of St Francis.

MESSAGE FROM MS ANITA FAM

Chairman
Board of Directors

2021 was a year where we continued to live with the Covid-19 pandemic. With variants like Omicron which have been more contagious, we often had to implement stricter measures to protect our patients and staff. We might have felt fatigue, but we never lost heart. With additional protection such as vaccinations and booster shots, and measures like ART tests for all visitors in place, our Assisi Team soldiered on and remained steadfast in our mission of caring for our patients and their loved ones.

Assisi Hospice is very close to my heart. Both my late parents-in-law had the benefit of Assisi's home palliative care service in 2002. In late 2014, my late father too received the care and support of our home palliative care team. It has been a personal privilege for me to be able to give back by being a Board director from 2005. Come July 2022, I would have served in Assisi for 17 years, six of them as Chairman of the Board.

Even when the Covid-19 pandemic started two years ago, we continued to stay true to our mission and purpose to be constantly life-affirming in an ever-changing care environment.

It has been my joy and honour to be part of Assisi's transformational care journey. We moved into this purpose-built space in 2017. We grew not only in terms of staff strength and the number of patients whom we serve and care for in our Inpatient, Home Care and Day Care services, but also in the depth of expertise and dedication in how we do so. We focused on good governance and received the Charity Transparency Award every year since it was first introduced in 2016, as well as the prestigious Charity Governance Award for a Large Charity in 2019. We have strived to be good stewards of the resources we have been blessed with, forming the Investment Committee to help ensure good financial stewardship. We championed actively for the recognition that everyone deserves to spend their last days in comfort and dignity, and that palliative care is an integral part of healthcare, and this has borne fruit especially in recent years.

Even when the Covid-19 pandemic started two years ago, we continued to stay true to our mission and purpose to be constantly life-affirming in an ever-changing care environment. As we look back on the past years of growth and challenges of providing care and comfort with Covid-19 in our midst, I would like to thank my fellow Board directors, our CEO, Ms Choo Shiu Ling, management and staff, funders, volunteers, donors, supporters and friends who have laboured and journeyed with us. In particular, I would like to pay a special tribute to Prof Cynthia Goh who passed away on 13 February 2022. Cynthia was our Medical Director from 1994 to 1999 and our Board director from 2004 to 2021. Not only was she a dear and special friend of Assisi, much of what Assisi is today was very much because of Cynthia's strategic foresight, wisdom and leadership. We miss her deeply but are comforted that she is now with our beloved Lord.

Most of all, I give thanks to the Almighty God for without Him, nothing would be possible. All glory to Him for His protection and provision, and may we continue in our journey of faith and obedience to serve our community of patients and families with love and compassion. May our beloved God bless each and every one of you.

MESSAGE FROM MS CHOO SHIU LING

Chief Executive Officer



Our task on this earth has always been to acknowledge and respond to our shared humanity, to care for those more vulnerable, and to use our best abilities in service to others.

MESSAGE

To be part of the Assisi team is to observe how the attributes of compassion and empathy make for a gentler and kinder community. I am privileged to witness the truth that it is possible to more often be our better selves, when surrounded by a community guided by values and with a respect for the dignity of each individual.

Our task on this earth has always been to acknowledge and respond to our shared humanity, to care for those more vulnerable, and to use our best abilities in service to others. This does not change with a pandemic, war or international financial turbulence. With deep thankfulness and admiration, I have seen our staff, volunteers, supporters, patients and families alike, dig deep into their reserves of strength to serve

those around them; to support those who have little reserves and in their times of vulnerability.

In our days, weeks, months and years ahead, be it when times are turbulent or joyful, let us remember to love our neighbour as ourselves. All glory to our Lord for His protection of the Assisi team as we continue to grow our ministry.



Love your neighbour as yourself.

Mark 12:31

BOARD OF DIRECTORS

BOARD OF DIRECTORS



Ms Anita Fam
Chairman



Mr Paul Lee
Deputy Chairman (till 13/05/21)



Mr Thomas Teo
Deputy Chairman (w.e.f. 01/07/21)



Prof Philip Choo
Director



Ms Beatrice Chen
Director



Ms Fiona Rankine
Director



A/Prof Cynthia Goh
Director (till 03/05/21)



Mr Jeffrey Seah
Director (till 30/06/21)



Ms Lynna Chandra
Director



Mr Nagaraj Sivaram
Director



Ms Jacqueline Wong
Director



Mr Jeff Cheong
Director



Mr Tony Mallek
Director



Mr Linus Tham
Director



A/Prof Philip Yap
Director



Ms Trillion So
Director



A/Prof Lita Chew
Director (w.e.f. 01/07/21)

MANAGEMENT TEAM



Top row from left:

- Mr Andy Tham** Head, Operations
- Ms Ann Neo** Head, IT
- Dr Peh Tan Ying** Head, Medical
- Ms Juliet Ng** Head, Communications & Community Engagement
- Ms Katherine Tan** Head, Human Resource
- Ms Jennifer Lum** Head, Finance

Bottom row from left:

- Ms Karen Poon** Mission Director
- Ms Chiew Cheng Fong** Director, Nursing
- Ms Choo Shiu Ling** Chief Executive Officer
- Dr Alethea Yee** Clinical Director
- Ms Ng Hwee Chin** Head, Psychosocial Support Services

Note: Photo was digitally created. Safe-distancing rules were strictly adhered to during photo-taking.

A TRIBUTE TO PROFESSOR CYNTHIA GOH



Original photo source: The Straits Times

Professor Cynthia Goh's lived example of how she cared for patients and families with grace and love, will remain in our hearts.

Prof Goh is a pioneer of Palliative Care in Singapore, and her reach in the Asia Pacific region has uplifted and inspired countless individuals and teams. This work of her hands which we saw, was always underscored by her complete commitment and devotion to caring for each individual patient and their caregivers.

There have been media stories about her extraordinary care for patients in the most difficult of circumstances. However, to have worked with Prof Goh would have been to witness that she cared for all her patients from all walks of life with the same deep commitment and unwavering effort to do her very best. What seemed extraordinary in a news story, was her service every day to all her patients.

We remember her as a tireless advocate when she went on palliative care training trips to Bhutan and Myanmar. From appealing to the local government and hospitals to produce the necessary medicine, to helping the local healthcare staff

overcome challenges they faced in providing palliative care, she spared no effort and would be working late into the night. "No matter how hard it is, if it needs to be done, try your best to do it" was the takeaway for our colleague who joined her on the trips.

She is very special to the Assisi Team. In 1994, she was the Medical Director of Assisi Hospice. In her five years with us, she was instrumental in helping Assisi develop into a comprehensive palliative care provider, the first in Singapore to provide the continuum of Inpatient, Home Care and Day Care services to meet the growing demand for palliative care. After stepping down as the Medical Director, she continued as our Visiting Consultant in service to our patients and to guide our Care Team.

She served on our Board from 2004 to 2021, giving us her clinical expertise and leadership. She drove our clinical standards as a member of the Programme and Services Committee (PSC) from 2006 to 2015, and was the Chairman of PSC from 2015 to 2021.

We remember her as a dedicated doctor, who would exchange updates with our Care Team on the condition of all the patients she referred to us. With the purest intention of providing the best possible care for patients, she was humble to seek the views of team members, yet candid and frank in guiding the team to improve aspects of care.

We remember her as one who took great care of those around her. When sharing a meal with her, she would always be splitting and distributing the food on the table to ensure all enjoyed the meal. Every Christmas, for the past many years, the gifts she gave to every Assisi staff always came with hand-written names; even when our staff strength more than doubled in size in recent years!

Thank you, Prof Goh, for touching our hearts and inspiring our souls.

ASSISI HOSPICE BOARD COMMITTEES 2021

Nominations Committee (NC)

Ms Anita Fam (Chairperson)
Ms Jacqueline Wong
Mr Paul Lee (till 13/05/21)
Mr Thomas Teo (w.e.f. 01/07/21)

Investment Committee (IC)

Mr Tony Mallek (Chairperson)
Ms Catherine Loh
Ms Celestine Khoo
Mr Paul Lee
Ms Tina Thai
Mr Thomas Teo (w.e.f. 01/07/21)

Audit Committee (AC)

Mr Nagaraj Sivaram (Chairperson)
Ms Angela Ee
Ms Karen Yeoh (w.e.f. 01/07/21)
Mr Linus Tham
Ms Pat Lynn Leong (till 30/06/21)
Mr Thomas Teo (till 30/06/21)
Ms Tina Thai

Programmes And Services Committee (PSC)

A/Prof Cynthia Goh (Chairperson) (till 03/05/21)
A/Prof Lita Chew (Chairperson) (w.e.f. 01/07/21)
Ms Beatrice Chen
Mr Christopher Chong

Dr Lim Su-Fee

Ms Lynna Chandra
A/Prof Philip Yap
A/P Simon Ong (w.e.f. 01/07/21)
Ms Terina Tan
Dr Vasanthi Rajalingam

Community Engagement Committee (CEC)

Ms Fiona Rankine (Chairperson)
Mr Jeffrey Seah (till 30/06/21)
Ms Neeta Lachmandas
Ms Penny Shone
Ms Susanna Kulatissa
Mrs Susie Koh
Ms Lynna Chandra
Mr Jeff Cheong

Finance Committee (FC)

Mr Tony Mallek (Interim Chairperson) (01/01/21 – 30/06/21)
 (Member) (w.e.f. 01/07/21)
Ms Trillion So (Member) (16/11/20 – 30/06/21)
 (Chairperson) (w.e.f. 01/07/21)
Ms Celestine Khoo
Mr Christopher Leong (till 30/06/21)
Mr John Ng (w.e.f. 01/07/21)
Ms Martina Wong
Mr Paul Lee

Building Management Committee (BMC)

Mr Linus Tham (Chairperson)
Mr Hoong Bee Lok (Deputy Chairperson) (w.e.f. 02/03/20)
Mr Chan Heng Lim
Mr Andrew Ang

Human Resource Committee (HRC)

Ms Jacqueline Wong (Chairperson)
Mr Gerard Koh (till 30/06/21)
Ms Lynna Chandra
Ms Ong Yin Chin
Prof Philip Choo
Mr Samir Bedi

Strategic Resource Committee (SRC)

Ms Anita Fam (Co-Chairperson)
Mr Jeffrey Seah (Co-Chairperson) (till 30/06/21)
 (Member) (01/07/21)
Ms Catherine Loh
Ms Fiona Rankine
Mr Jeff Cheong
Ms Leanne Robers
Ms Lee Hwee Chin
Mr Paul Lee (till 13/05/21)
Ms Penny Graham
Mr Rovik Robert
Mr Thomas Teo

THE BOARD DIRECTORS' ATTENDANCE AT BOARD MEETINGS FOR THE PERIOD JANUARY TO DECEMBER 2021:

Name of Directors	Number of Board Meetings invited to attend	Attendance
Ms Anita Fam	4	4
Mr Paul Lee (till 13/05/21)	2	2
Ms Beatrice Chen	4	4
A/Prof Cynthia Goh (till 03/05/21)	2	0
Ms Fiona Rankine	4	4
Ms Jacqueline Wong	4	3
Mr Jeff Cheong	4	3
Mr Jeffrey Seah (till 30/06/21)	2	2
A/Prof Lita Chew (w.e.f. 01/07/21)	2	1
Mr Linus Tham	4	4
Ms Lynna Chandra	4	3
Mr Nagaraj Sivaram	4	4
Prof Philip Choo	4	2
A/Prof Philip Yap	4	4
Mr Thomas Teo (w.e.f. 01/07/21)	2	2
Mr Tony Mallek	4	4
Ms Trillion So	4	4

NON-BOARD LEVEL COMMITTEES

Facility Medifund Committee (FMC)

Ms Linda Auyong (Chairperson)
Ms Jacqueline Khoo
Ms Michelle Chian (w.e.f. 01/04/21)
Sr Linda Sim
Ms Rose Lu

Ethics Advisory Panel (EAP)

A/Prof Lalit Krishna (Chairperson)
A/Prof Chan Mei Yoke
Mr Christopher Chong
Fr James Yeo
A/Prof Lai Siang Hui
Ms Terina Tan

All information is correct and up-to-date as of 31 December 2021.

GOVERNANCE REPORT

Assisi Hospice is committed to practices that ensure good governance and management with specific reference to the principles of the Code of Governance for Charities and Institutions of a Public Character (IPC). Assisi Hospice places an ongoing priority on improving its governance and management practices.

CHARITY TRANSPARENCY AWARD

Assisi Hospice has been a proud recipient of the Charity Transparency Award in 2016, 2017, 2018 and 2019. The Charity Transparency Award was introduced by the Charity Council in 2016 to recognise charities with good disclosure practices. The award aims to emphasise that transparency and good disclosure practices are important pillars of good governance.

In 2017 Assisi Hospice received the Charity Governance Award - Special Commendation Award for Operational Efficiency. The award affirms that Assisi Hospice has established exemplary practices in service delivery, organisational performance, CEO performance and Board effectiveness.

In 2019 Assisi Hospice received the Charity Governance Award for a Large Charity. This is the highest-level award and the winner demonstrates the highest standards in areas of corporate governance and management, clarity of strategy, risk management, transparency, operational efficiency and compliance.

For 2020 and 2021, there was a hiatus for the Charity Transparency and Governance Awards.

CONFLICT OF INTEREST

Board members operate under a conflict of interest disclosure process. Annual conflict of interest disclosure statements are undertaken by all members.

RESERVE POLICY

The Board established a Reserve Policy of not more than three years of operating expenditure to meet its operational needs.

DISCLOSURE AND TRANSPARENCY

Annual reports are prepared, which include up-to-date information on our programmes, activities, performance and finances, as well as a listing of the Board's key office-bearers. Audited financial information is available on Assisi Hospice's website as required by the Commissioner of Charities.

HELPING THE NEEDY

50%
of our patients are poorest of the poor and means-tested to the lowest income level.

No. of pro bono funerals (inpatient):

12

IN ADDITION TO OUR SUBSTANTIVE SUBSIDIES FOR PALLIATIVE HEALTHCARE FOR THE POOR:

We provided **45** patients with financial support in areas like ambulance transfers, transport, supermarket vouchers.

We provided **5** patients with cash in hand for daily living while waiting for formal financial assistance from other agencies.

No. of patients under No One Dies Alone programme:

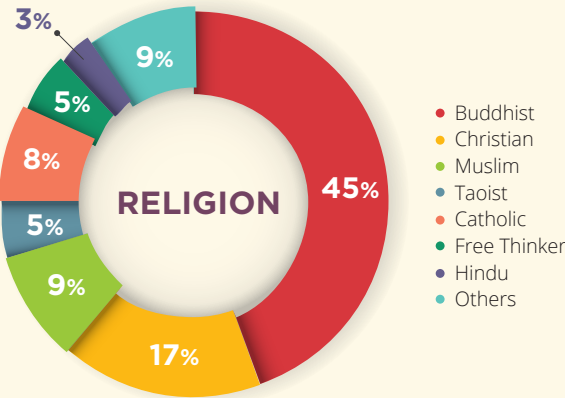
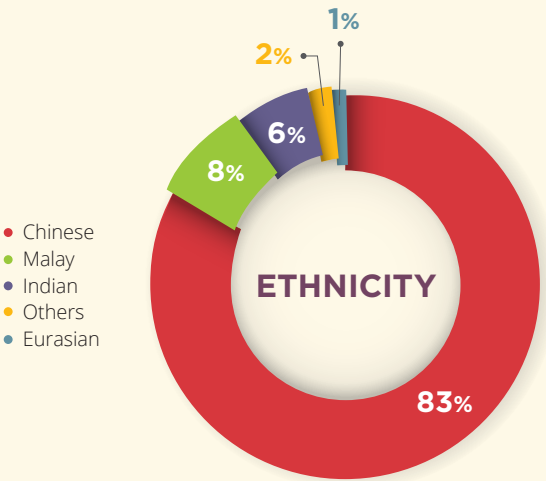
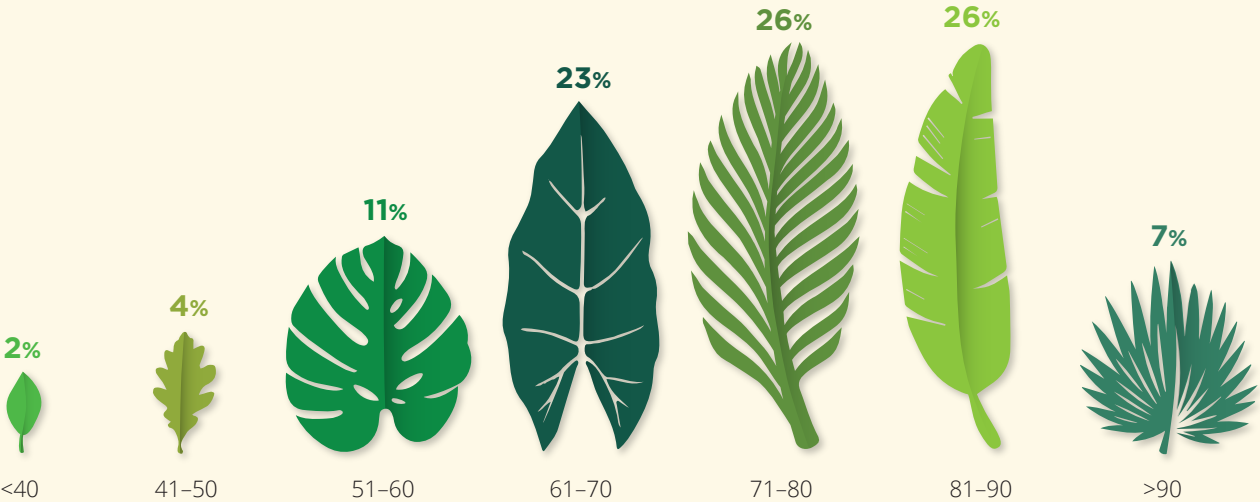
51

No. of vigil hours:

609

PATIENT PROFILE

AGE



PATIENT PROFILE

PATIENTS BY SERVICE TYPE

TOTAL ADMISSIONS: 2490



Home Care

1592



Inpatient

806



Day Care

92

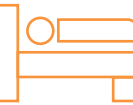
AVERAGE LENGTH OF STAY



18

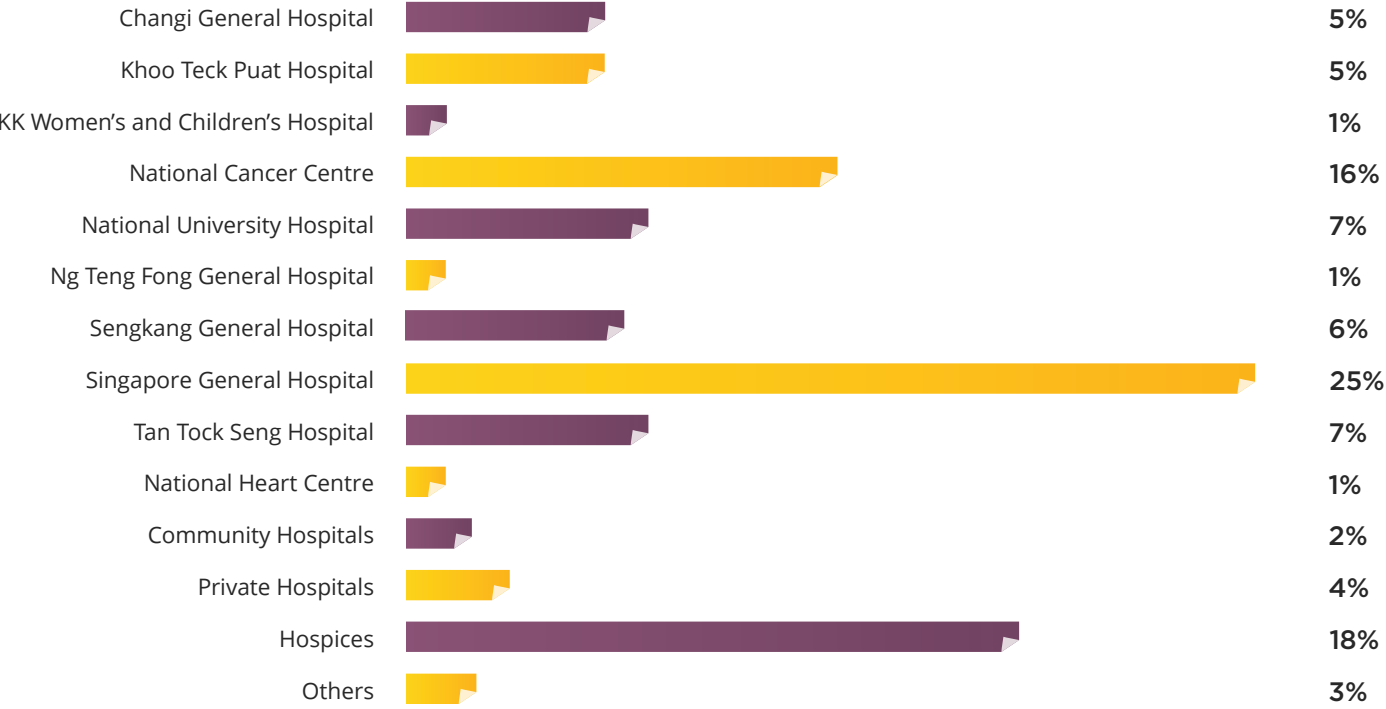
Days

BED OCCUPANCY



70%

REFERRAL SOURCES



PERSEVERANCE

We remain steadfast in our commitment to provide care to our patients and their loved ones, ensuring that services are not disrupted amidst the pandemic.

PERSEVERANCE

ENSURING CARE CONTINUES

As we entered the second year of the pandemic in 2021, we continued to persevere to provide individualised care to patients and their families, amidst the continuous and evolving pandemic situation.

We held our "Assisi Vaccinates!" exercise and all staff who are eligible for vaccination are vaccinated.

With periods of increase in community cases and appearance of variants which were more contagious, we implemented stricter infection control measures to protect our patients and staff.

In June 2021, visitor access to nursing homes and other healthcare institutions had to be suspended due to a significant increase in community transmissions. We continued to remain open to visitors 24/7; we are fortunate to have a spacious purpose-built hospice with over 60% of our beds in single rooms. We could still allow 4 designated visitors per patient, with no limits on time spent, during the height of the pandemic.



With periods of increase in community cases and appearance of variants which were more contagious, we implemented stricter infection control measures to protect our patients and staff.

From July 2021, daily Antigen Rapid Testing (ART) became compulsory for all visitors and volunteers to the inpatient wards. From Sep 2021, all staff had to don N95 masks whenever they were in the wards and Day Care Centre, or in direct contact with inpatients outside of ward areas. Our volunteers also had to be masked-fitted and don N95 masks when doing their duties.



Our staff were among the first in the community to receive their Covid-19 vaccinations.



From Sep 2021, all staff had to don N95 masks whenever they were in the wards.

Covid-19 clusters were later appearing in healthcare institutions, causing concern due to the vulnerability of patients. In Sep 2021, we had our first ever ward lockdown due to the presence of one patient with Covid-19 in a particular ward. During the lockdown period, our staff rallied together and came back from their annual leave to provide manpower support. Due to the strict infection control measures, we were able to exit the lockdown quickly.



All staff had to don N95 masks during home visits and in the Day Care Centre.

For our Home Care service, we started to visit patients who were Covid-19 positive and under the Home Recovery Programme in Dec 2021. Some patients did not wish to return to the acute hospital after contracting Covid-19. These cases were infrequent, but it was important to provide support as a return to the hospital may not be in the patient's best interest especially at the end-of-life.

Like everyone else, we also felt fatigued, but we embraced the necessary measures to ensure continuity in care for our patients.


For our Home Care service, we started to visit patients who were Covid-19 positive and under the Home Recovery Programme in Dec 2021.



Seamless care across three services

On behalf of our family I am writing to express our appreciation to Assisi Hospice (AH) for the care of our beloved brother/uncle, the late Mr Chan K.F. (whom we call Fei) during his journey with lung cancer.

He started being under the care of AH from August 2020, initially under Home Care then Day Care as well as Inpatient care. His final admission was for one month until his demise on March 12, 2021. I am very impressed with the seamless service and high level of professional care by AH over the full range of service from Home Care to Day Care to Inpatient Care.

We are especially appreciative of:

- The high level of professional clinical practice of Palliative Care which was targeted to reduce pain and discomfort and related symptoms appropriately. I personally appreciate the communications with the medical team in discussing his treatment and updates when changes occurred. It brought great comfort to us that Fei's final moments were free from pain and discomfort, and he was treated with dignity and respect throughout his stay.*
- The quick response to request for help when he became symptomatic and was unmanageable at home as he was living alone, for example visits by home care nurse and*

doctor, very prompt arrangements for his admission (with less than an hour of sounding our call for help)

- Great effort made to meet Fei's needs and demands, for example his desire to smoke cigarettes by being wheeled by volunteers to the level 4 Garden.*
- Fei's Day Care experience was brightened by the different and varied hawker food at his request and opportunity to play mahjong. Thank you for the point-to-point transport arrangements*
- Attentive, patient and responsive nursing and supportive care especially during the final month of his life when he was sometimes inpatient and demanding*
- The different volunteers also deserve special mention as they frequently kept him company and wheeled him for his repeated daily smoking sessions. They were friendly, polite and respectful. One of them brought him delicious "mee siam" for tea break at his request. Many of them took the trouble to come to his room to bid him goodbye at the end of their day of volunteering.*
- The Home Care nurse was very professional and thorough in providing Home Care with support of the doctor. She was responsible and took prompt action when I contacted her at a time when Fei had a bad turn of symptoms.*

**Yours sincerely,
Dr Chan N. F.
Sister of Chan K.F
Written on behalf of the family**

STORIES OF CARE

We supported Danny and his mother

Nothing pains a mother more than seeing her own child unwell. 72 year-old Mdm Lim Heo cared for her son Danny Tan for 33 years. At a few months old, Danny was diagnosed with Down Syndrome. Even though it was a shock, the family cared for him and loved him deeply.

Mdm Lim was dealt another blow when Danny was diagnosed with leukaemia at the age of 6. She bravely soldiered on, bringing him for treatment and chemotherapy in the hospital for almost a year. This precious boy pulled through and won the battle against cancer. Danny attended a special school till he was 18 years old, and progressed to an employment development centre.

Danny's sister moved to the United States in the 1990s. In 2015, the close-knit family lost an important family member when Danny's father passed away due to a heart condition. Mdm Lim became Danny's sole caregiver.

In February 2020, Danny was diagnosed with end-stage chronic kidney disease during a routine health check. Mdm Lim felt that it would be tough on Danny to undergo dialysis. Instead, he came under the care of Assisi Hospice in November 2020 and started to attend our Day Care Centre three days a week, offering much needed respite for Mdm Lim. Mdm Lim said, "It gave him something to look forward to. He enjoyed the music therapy and physiotherapy sessions at the Centre. The staff and other patients all loved him. They also celebrated his birthday for him."

As Danny's disease progressed, Mdm Lim found it increasingly difficult to take care of him at home. He was restless and would complain of headache and pain in his legs and waist. Mdm Lim said, "I would get frustrated and scold him." In April 2021, he had an epileptic episode and was admitted to Assisi's Inpatient



We provided care and support for Danny Tan and his mother, Mdm Lim Heo.

The nurses and doctors cared for him. I can see that they really ‘sayang’ him.

ward. Mdm Lim said, "The nurses and doctors cared for him. I can see that they really ‘sayang’ him." Mdm Lim spent every night and day with Danny at Assisi Hospice as Danny was not used to being alone.



Danny celebrating his birthday with staff in Assisi Day Care Centre.

However, Danny missed home. Mdm Lim was under tremendous stress as she was no longer able to cope with taking care of Danny alone. The cost of private home nursing care was too high and out of reach. To enable Danny to be cared for at home, our medical social worker helped Mdm Lim to apply for subsidised home-based respite care.

After spending a month at home, Danny had seizures again. He was re-admitted to our Inpatient ward. After about a week, Danny passed away peacefully on 31 May 2021 in Assisi after his niece played a song for him, on the piano over the phone from the United States. Mdm Lim said, "I am grateful to the Assisi team for caring for Danny and especially the social workers for helping during the difficult period."

We also nominated Mdm Lim Heo for the Singapore Patient Caregiver Award 2021 and she was one of the recipients of the award.

We cared for Karthik who had special needs

While all parents look forward to seeing their children grow taller and stronger, parents who have children suffering from chronic conditions often have to bear the pain of seeing them grow weaker. 18-year-old Karthik was diagnosed with Duchenne Muscular Dystrophy when he was 7 years old. His mother, Mdm Nalaini, noticed that he started walking and talking later than the average child, and he had frequent falls. Despite his condition, Karthik was a talkative and bubbly child. He enjoyed attending AWWA School and loved to watch documentaries about animals and nature.

However, Karthik's muscles were progressively degenerating. About four years ago, he became dependent on a wheelchair to move around. Karthik's father worked as a storekeeper, while Mdm Nalaini worked as a night-shift cashier to enable her to



Karthik and his favourite Iron Man cake.



Karthik celebrating his birthday in Assisi with family and our staff.

supplement the family income and care for Karthik at the same time. However, Karthik's deterioration and increased care needs made it difficult for the family to cope with his care at home. The National University Hospital referred Karthik to Assisi Hospice and he was admitted in May 2021.

Our clinical team helped to manage his symptoms of pain which he experienced due to a breakdown of his muscle fibres towards the end stage of his life. As he experienced progressive weakness and required more help for transfers and activities of daily living, our nurses provided support for him.

The Assisi team provided him with psycho-emotional support as he was a young man facing his own mortality. We were there when he was afraid, when he was asking questions, and when his family needed the assurance that they were not alone in their experience.

Even though Karthik's condition was deteriorating, his spirit remained strong. He had a real zest for life and was intent on enjoying it to the fullest. He livened up the whole ward because

he was very jovial, with a loud happy voice. We got used to being greeted by this cheerful young man, whizzing around the ward in his motorised wheelchair. He became good friends with our Care team, volunteers, and even other patients in the same ward. His best friend in the ward was an elderly patient Uncle Tan, and they would tease each other and have verbal spars daily. The Care Team organised a celebration for his 18th birthday and he had a blast, celebrating with all his favourite food from the different stalls at Whampoa Hawker Centre and his Iron Man cake, surrounded by his family and the Assisi Care Team. He was a Lego fan and always yearned for a remote-control Lego truck, but felt it was too expensive. He overcame difficulties and completed several smaller Lego sets that our Care team got him. Eventually, we gifted him with the Lego truck set. His strength took a dip that day and he was too weak to put it together, but he had a satisfied smile as he held it in his hands.

Karthik passed away at Assisi on 27 Jun 2021. The memory of his happy smiles remains in our hearts. He has taught us much about life, friendships and living well.

We cared for Mdm Ng who was staying with her elderly siblings

For the elderly who are sick and have little social support, bringing medical care and comfort to them at home is especially important during this Covid-19 pandemic.

86 year-old Mdm Ng Phak Ngoh was single and stayed with her two siblings who were also in their 80s. She was diagnosed with lung cancer in 2020. She suffered from back pain, chest pains and often felt breathless. She used to be able to manage household chores but found it increasingly difficult to do so. She was also unable to go out to get groceries. Sometimes, she felt exhausted just from talking. Her younger sister, who used to cook for the family, was suffering from worsening osteoarthritis and osteoporosis and needed a walker to move around the house. She could no longer cook. They were both dependent on their brother to buy food and run simple errands.

Assisi Home Care team started caring for Mdm Ng in November 2020. Our nurses and doctors visited her regularly, helping to manage her symptoms of breathlessness and pain. Our care team adjusted the dosage of her medication according to her condition to control her symptoms more effectively. Mdm Ng



Mdm Ng with our Home Care Nurse.



Mdm Ng (in blue) with her siblings.

Our nurses and doctors visited her regularly, helping to manage her symptoms of breathlessness and pain.

said, "I am not afraid of death, but I am afraid of pain. I feel more comfortable now after taking the medicine according to what the nurse tells me."

Our medical social worker provided a listening ear to Mdm Ng and her family, and practical assistance like referral for services such as medical escort for her medical appointments, and befrienders who came by to check in on her at home. As Mdm Ng was dependent on her limited savings for daily living, our social worker also helped her to apply for subsidy to purchase an oxygen concentrator which provided greater relief for her breathlessness.

Mdm Ng's condition deteriorated and she was admitted to our Inpatient ward in Nov 2021. She passed on peacefully at Assisi on 15 Dec 2021.

We cared for Mdm Chow who was staying alone

74 year-old Mdm Chow Mai Lai was adopted when she was two years old. After only a few years of schooling, she started working at the tender age of 12 when her adoptive father passed away. As a young child, she helped with baby-sitting, house-cleaning and dish washing at hawker stalls to supplement the family's income. When she was 26 years old, her adoptive mother passed away due to kidney disease. She stayed alone in a one-room rental flat in Kim Tian as she was not close to her siblings.

Throughout the years, she led a simple life and worked hard for a living. She took on waitressing and cleaning jobs, the longest being a cleaner in an office building in Shenton Way, where she spent over 20 years. She made coffee and tea for the staff besides cleaning duties and got along well with them. She remained single and continued to stay alone. After a long day at work, her simple pleasure was brewing soup for herself.



As Mdm Chow's wish was to remain at home as far as possible, our medical social worker provided support, including exploring home personal care services for regular house cleaning.

Even when she was diagnosed with bladder cancer 8 years ago, she continued working. She finally retired 2 years ago at the age of 72. However, she soon discovered that her cancer had spread. She had difficulty passing urine and had an operation for a Percutaneous nephrostomy (PCN) insertion, to drain the urine directly from her kidney to a drainage bag permanently. She was frequently anxious about the leakage from her urostomy bag at her PCN insertion area. Due to the cancer, her right leg was swollen and getting weaker. She had to move around the house using furniture for support and fell down a few times. She could no longer manage the daily household chores which she used



Our Home Care nurse visited Mdm Chow weekly to check on her health condition and helped to replace her urostomy bag to prevent leakage.

to take pride in, like keeping her home clean and tidy. She was unable to do grocery shopping or buy food for herself and was dependent on the goodwill and assistance from her neighbours and a social service organisation. She was also dependent on financial assistance to cope with her day-to-day expenses.

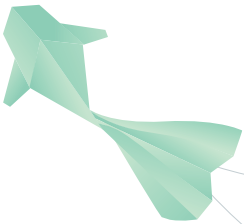
Mdm Chow came under the care of Assisi Hospice Home Care team on 14 July 2021. Our Home Care nurse visited her

weekly to check on her health condition and helped to replace her urostomy bag to prevent leakage. The Care team provided her with a donated wheelchair, which helped her to move around in and out of the house. As Mdm Chow's wish was to remain at home as far as possible, our medical social worker provided support, including exploring home personal care services for regular house cleaning which would help her to be more comfortable at home, and providing her needed medical consumables like milk supplements and waterproof bed pads.

Mdm Chow's condition deteriorated and was admitted to our Inpatient ward in Feb 2022. She passed away peacefully at Assisi on 3 Mar 2022.



Mdm Chow (right) with our Home Care Nurse Li Xueling.



Responding at all hours to provide comfort

Dear St Elizabeth Ward Doctors, Nurses & staff,

We want to thank all the dedicated doctors, nurses and staff for your loving care of my late father, Lau Y.C, during the last two weeks of his life. Due to his sickness, he was not able to call for help from his bed, which makes us worry whatever we went back home. We feel assured when we were told the nurses on duty would constantly pop into the room to check on him late at night. The nurses would respond at all hours to provide comfort to him, ensuring he is feeling comfortable and being taken care of. We are grateful that during his final days, the doctors and nurses helped us through the difficult days, explaining to us what was going to happen so we are prepared, and suggested we should spend more time with him. During his last few days, we can see the nurses were very professional, by providing care and comfort to lessen his pain as well as to give him peace. Thank you all, from the bottom of our heart for your help and support, giving us direction on how to take care of him and do what is best for him.

**Best Regards,
Family of late Lau Y.C.**

CARING FOR OUR STAFF

The Covid-19 pandemic has had a major impact on our lives. Many of us are facing challenges that can be stressful and overwhelming in our personal lives. Our healthcare colleagues are not exempted from these stresses, even as they continue their caregiving duties. At Assisi, we care for all in our team as we give our best to our patients and their loved ones.

We showed our care with small touches. For our Home Care colleagues who often had to make 3 or 4 home visits a day, we provided hot meals during the Heightened Alert Phase 2 in May 2021 when dining in at eateries was not allowed and they were unable to have their meals in-between visits.

Our nursing leads and heads of department check in with their teams regularly on their mental well-being. Our staff have access

From Jan 2021, we allowed our foreign staff to reunite with their families, and also supported their quarantine cost upon arrival back in Singapore.

to counselling services when needed. For many of our nursing colleagues who are foreigners, they had not seen their families, including their babies and young children for an extended period due to the travel restrictions. We had colleagues who had to face challenging situations, like a sudden illness, without their family with them. The leadership team stepped in to provide both practical and emotional support needed. From Jan 2021, we allowed our foreign staff to reunite with their families, and also supported their quarantine cost upon arrival back in Singapore.



Our staff nurse Michael only got to see his baby daughter when she was four months old.

Nurse Michael saw his daughter for the first time

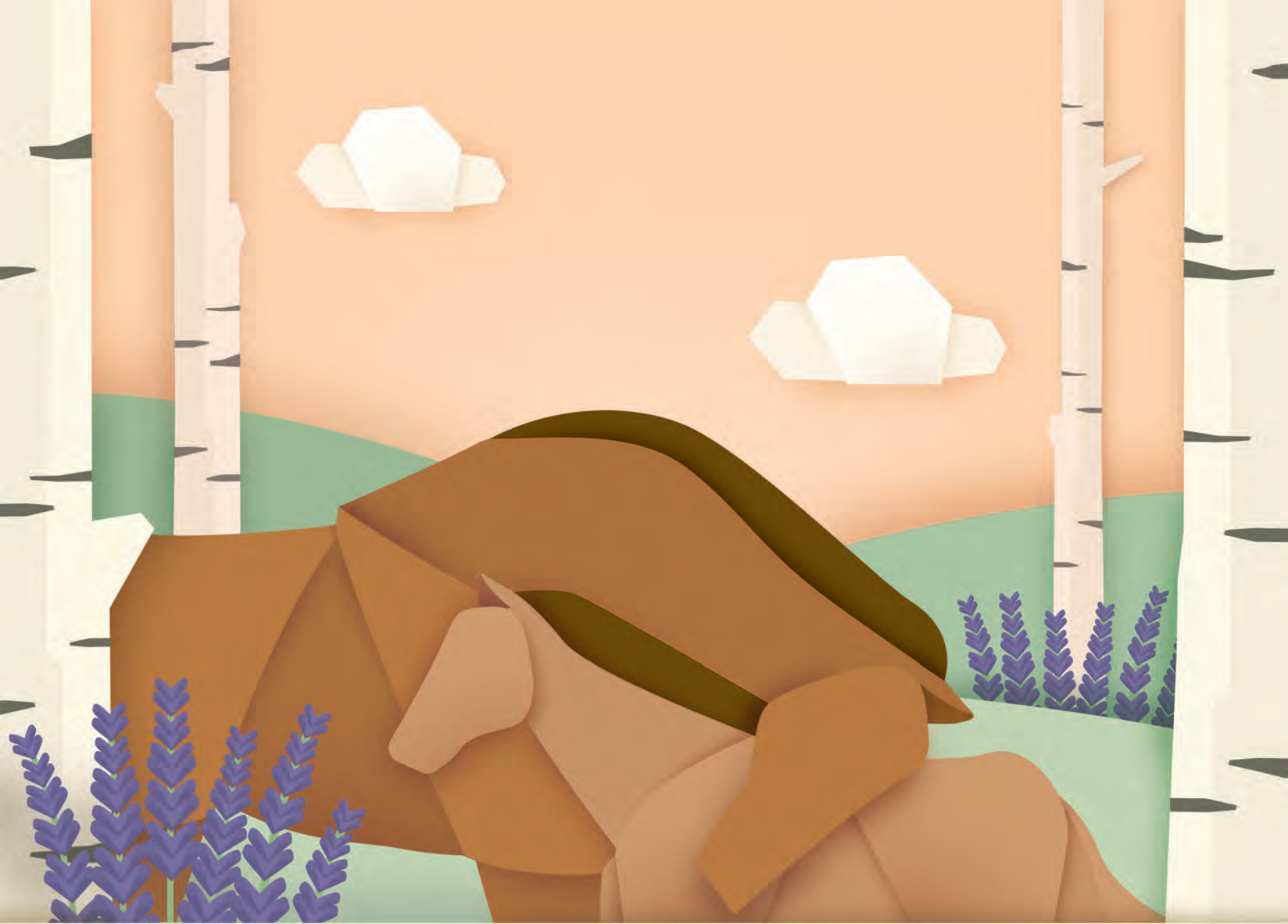
Staff nurse Michael Domingo flew home to the Philippines in Sep 2021 to see his then 4-month daughter for the first time. His wife is also a healthcare staff working in Singapore. When they decided to get married in Mar 2020, they had initially planned to hold the wedding in the Philippines. However, they were unable to do so due to the pandemic, and they eventually registered their marriage in Singapore in Jun 2020. Soon after, his wife was pregnant with their first child and flew back to the Philippines to deliver their daughter in May 2021. Michael chose not to fly back together with his wife to ensure that at least one of them was still working in Singapore and would not be trapped back home due to Covid-19 measures. However, it was emotionally challenging when he was not able to be present for his daughter's birth. He said, "She was a premature baby and my wife delivered through an emergency C-section after a long labour of 7 hours. Our baby was very small, only 1.8kg and had to be in intensive care for a week. I was anxious and felt helpless, and could only pray for their safety."

But she is also my motivation to work hard and excel in my work.

He finally flew back home in Sep 2021 after his wife came back to Singapore. He took leave for six weeks and spent two weeks at home. The rest of his leave was spent at a quarantine facility in Philippines, and SHN when back in Singapore.

He said, "The time was short and very precious. I was a full-time Daddy, carrying my baby, changing diapers for her, feeding her at night."

His heart was heavy when he had to leave his daughter again. He said, "But she is also my motivation to work hard and excel in my work."



REVERENCE FOR LIFE

We cherish life and care for the grieving, journeying with them after their loss.

REVERENCE FOR LIFE

BEREAVEMENT CARE PROGRAMME REACHING OUT TO THOSE IN GRIEF

Bereavement care is part of the continuum of palliative care for patients and their families and is as important as the care before death occurs. While bereaved persons are mostly able to cope with their bereavement within their own support network, there is a population of bereaved persons who will benefit from professional help to aid their coping. These may include those who experience traumatic loss through death of their loved one when the death is perceived as sudden, untimely or they are unprepared; those who have limited social support; those who have difficulties coping with loss of a child; those who have multiple losses in the family; those who have known mental health conditions which complicate coping with the loss; those who express suicide ideation or have previous suicide attempt in coping with the loss. It is important for them to receive the needed support in their grief journey.

Assisi Hospice strengthened our bereavement support through the specialised Bereavement Care Programme, reaching out to more family members of our late patients through individual counselling, art and music therapy and support groups when needed. From Jan to Nov 2021, the Bereavement Care team reached out to over 394 families in the first month after their loss to assess their need for support, and 110 family members of our late patients received support from the Bereavement Care team.

Members of Assisi Hospice's Bereavement Care Team share the stories of family members of former patients who benefited from the Bereavement Care programme.

Husband copes with life after losing his wife

61 year-old Vincent P Carthigasu lost his beloved wife of 34 years, Selina, in 2021. Selina battled with a rare cancer for two years, and was admitted to Assisi Hospice in early March. She passed on after a month.

Vincent felt that his life had been shattered. Well-intentioned “advice” from friends telling him to “move on” were jarring to his ears. He said, “I didn’t want to move on. I wanted things to stay as they were.”

He would visit the venue of her wake. He would even message her and reply to himself using her phone, just to see her name appear. He was on the verge of breaking down.

Our Bereavement Care Team supported Vincent with regular counselling. When he came to Assisi for the counselling sessions every week, he would feel the urge to revisit the room that Selina used to stay in, even though she was not there anymore.



Our counsellor Abigail Yang using a therapy tool to help Vincent express his feelings.

He said, “The counsellor was very gentle. She just asked me why I wanted to do that. She did not ask me to ‘move on’.”



Vincent, Selina and their two daughters had a photo-taking session during Selina's stay in Assisi Hospice.



Vincent and his wife, Selina, were married for 34 years.

“
... she's always been a part of me, and she's still a part of me, and she's still in the children. When I see my daughters smile, I see Selina.

Vincent shared that the counselling sessions had helped him to put things in perspective, and prevented him from going into a downward spiral. He learned to live life while embracing the continuing bond he had with Selina.

He said, “I continue with life, but I don't discard my wife and the past. Now I can say that yes, Selina has passed away, she's no longer here, she's physically not here anymore, but she's always been a part of me, and she's still a part of me, and she's still in the children. When I see my daughters smile, I see Selina.”

Young child obtained closure through art therapy

8-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 our Art Therapist Vivian Wong from the Bereavement Care Team, to find out if art therapy may provide deeper insights into Alice's thoughts and how she was coping emotionally.

Vivian saw Alice and her mother for three sessions. In the first session, Vivian conducted a warm-up art activity to get to know them and to get a sense of the dynamics between mother and daughter. The topic of grief, loss and rituals arose when Alice spoke about her pets dying. Alice expressed misgivings about being excluded from her grandfather's last rites, and her mother had the opportunity to explain her reasons for it.

In the next session, Alice painted a memory box to remember her grandfather with. Alice consulted her mother and included elements related to travelling and drinking, which her grandfather loved, on the box cover. 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 with Chinese characters that conveyed “I love you, Father”. Alice raised questions like what staff did when patients die, whether the bodies looked scary, and how did her grandfather look when he passed on. Vivian answered her queries and her mother assured her that her grandfather passed away looking peaceful. Alice expressed feeling “weird”

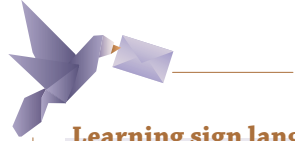


The memory box made by Alice and her mother.

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 the patient's death; and for her mother to explain her decision and actions. Both daughter and granddaughter were given the opportunity to create tangible items to remember the patient with. They had the chance to express their love and wishes for the patient symbolically with their artworks kept safe in a box, which engendered a sense of closure and continuing bonds with the late patient. There was mutual holding between mother and daughter as they honoured their loved one in the same space. Working together and listening to each other affirmed the trusting relationship they share.”



Learning sign language to communicate with patient

The family of the late He J.H. would like to thank the team from St Elizabeth ward of Assisi Hospice who took care of our brother during his stay from 28 Jul 21 to 10 Aug 21 with their exceptional dedication and patience. His short stay was made memorable, comfortable and painless. Unfortunately, he was on “silent mode” for his entire life of 78 years, and therefore was unable to express his gratitude and sincere thanks to those who attended to him till the very end.

On his behalf, our family would like to say a BIG THANK YOU to ALL especially Staff Nurse Christian, who made extra effort to learn sign language and another who had to clean him up when he got messy.

A big hug from the family of the late He J.H.

INTERFAITH MEMORIAL GOES VIRTUAL



Sister Eucheria lighting the candles in memory of patients who had passed on.

We started our first Interfaith Memorial Service (IFMS) in 2005, holding it every four months for caregivers and staff in remembrance of patients who had passed on. It is a dedicated time for the bereaved to remember their loved ones together with their healthcare team, to cherish their lived life and to mourn their departure. Religious leaders from the Christian,

Islamic, Buddhist, Hindu and Taoist faiths are invited to offer prayer and words of comfort for the bereaved. Bereaved family members are invited to share their coping experience with their loss, with aim to provide sense of empathy, affirmation and comfort to the rest who have also lost their loved ones through illness and death.

REVERENCE FOR LIFE

Due to the Covid-19 pandemic, we were unable to gather physically in 2020. In 2021, the social distancing requirements also did not allow us to resume the physical IFMS with a usual attendance of over 100 people.

We decided to move this meaningful event to a virtual platform and broadcasted the IFMS on Assisi YouTube channel in May and November 2021. More than 100 bereaved family members and our colleagues gathered virtually during the respective sessions, while about 400 family and friends tuned in after the respective broadcast.

It was challenging for the team to design the program on a virtual platform and ensure that it continued to achieve its desired impact. We encouraged more interaction through live messaging with the audience during the virtual service. We included meaningful segments which served the needs of our audience experiencing difficult losses, including video sharing by the bereaved family members on how they coped with grief, and a photo montage of photos and messages to the deceased, provided by the family. Video recording of prayers and words of comfort by religious leaders from five different faiths continue to provide encouragement to the caregivers. Collaborating across teams and picking up new skills allowed us to overcome the technical challenges involved in video creation and doing live broadcasts.

Paul Jude Gerald's father, Paul Thomas Ebenezer, was our Home Care patient and passed on in Jun 2021. Paul Jude Gerald attended the virtual IFMS in Nov 2021 and found it meaningful.

He said, "The prayers of the religious leaders of different faiths, and the montage of all those families who have lost their loved ones with words from their hearts meant a lot to me. As I read, I know I am not alone out there. We have to be there for one another because only we know how the other person feels, as we have gone through what the other person has gone through."

Through the IFMS, he learned about our Bereavement Care counselling service and contacted us to request for bereavement support. He said, "The Memorial Service supported me in coping with my grief by assuring me that I am not alone. There are support services out there and they are just a phone call away."



We would like to thank the Estate of Dr Joseph Lim Boon Tiong for supporting our work for patients and their caregivers.



Appreciated the team's flexibility and understanding

The level of patient care extended to my mom was exceptional. Our family complicated matters by moving my mom between her own house and my brother's house. Your team had to remember who you have spoken to, our names, when the last conversation happened and what was conveyed. The team's flexibility and understanding was much appreciated.

Please know your team has made a difference to our lives in the last one year and in particular, when things were excruciatingly difficult, the patience shown and the empathy we received over the phone and we experienced in person during the home visits was immeasurable.

**Yours sincerely,
The family of late Madam Ngow
Eileen Tan**



JOYFULNESS

We continue to create moments of joy and delight for our patients.

JOYFULNESS

Choosing Happiness Every Day

“快乐是一天，伤心也是一天，不如快快乐乐过一天。（A day passes whether you are happy or sad, we should choose to live the day in happiness.）” – This is the life motto of our Day Care patient 75 year-old Mdm Tan Choon Sin, who has lost both her arms and part of her legs. The artwork printed on the tote bags was coloured by Mdm Tan using a universal cuff attached to her upper arm. The universal cuff used by our occupational therapist to assist her enabled her to find joy and independence through painting.

Three years ago, Mdm Tan was diagnosed with sepsis (blood infection) and became critically ill. Eventually she pulled through but had to amputate both her arms and part of her legs due to gangrene.

After being discharged, Mdm Tan had to adjust from being an active homemaker who loved taking up different types of courses like cooking, baking and English, to requiring assistance in almost all aspects of her daily living. She missed being able to whip up delicious meals for her family, and completing tasks independently.

Mdm Tan was diagnosed with chronic kidney disease and joined Assisi Hospice's Day Care Centre in Jan 2021. Despite her health and physical challenges, she remains bubbly and cheerful amidst adversity. She enjoys chatting with staff and other patients, and the physiotherapy, music and art therapy sessions.

The tote bags with Mdm Tan's artwork are for sale in Assisi Shop on Lazada. She said, “I am very happy that my artwork has been chosen to contribute to charity.”

“

I am very happy that my artwork has been chosen to contribute to charity.



Mdm Tan working on her artwork.



The tote bags with Mdm Tan's artwork are for sale in Assisi Shop on Lazada.

Beading Brings Her Joy

82 year-old Mrs Perera is a patient of Assisi Hospice Day Care. Her husband, 87 year-old Mr Perera, became a Home Care patient of Assisi in Nov 2019. They both started attending Day Care in Apr 2021. Mr Perera had interstitial lung disease since 2018 while Mrs Perera was diagnosed with heart failure later. From a caregiver, she also became a patient. The couple has been married for 51 years. A loving wife, she helps her husband with bathing, toileting and changing, and pushes him on the wheelchair when they need to travel for longer distances despite her own illness.

At the Day Care Centre, during her Occupational Therapy sessions, Mrs Perera regained her passion for beading, a long-forgotten hobby that she used to love in her 30s. She said, "When I am focused on beading, I forget about my worries." She also finds a great sense of satisfaction in being a mentor to other patients in beading.



**When I am focused on beading,
I forget about my worries.**



Mr and Mrs Perera has been married for 51 years.



Beading helps Mrs Perera forget about her worries.



Goodbye from a patient

To the staff of St Mark Ward at Assisi Hospice,

Words cannot express my gratitude to all of you during my stay here. The care, concern and attention made me feel very comfortable and peaceful despite the pain I was in.

My final journey was pleasant and I feel very blessed. These are the people whom I would like to say thank you to:

The doctors – for all your checks on me to ensure that I was doing okay.

The nurses – for all the hard and devoted work in sponging, turning me over, changing diapers, bringing medicine and meals to me, amongst many other things.

Music Therapist – for strumming your guitar and singing with your beautiful voice to soothe my pain and lift up my spirits, and for asking me to be a part of the two videos that I was proud to star in. I hope they will inspire and help others in their difficult moments.

Physiotherapists – for the therapeutic “NASA” trips to Koi garden, the laughter, jokes and giggles to liven up my spirits, and not forgetting Melissa’s “surgery” on the seahorse.

Pastoral Counsellors – for offering Holy Communion and praying over me.

Thank you for making my journey to heaven a peaceful and calm one. I have gone to have dinner with Jesus. I will be praying for all of you and I will be seeing you in heaven, my friends!

The farewell is good that is why it is called goodbye.

**Signing off and till we meet again.
Uncle Peter
14 Jul to 17 Aug 2021**

HEART-WARMING MOMENTS AT HAND CHIMES CHOIR CONCERT

Our Senior Boleh Hand Chimes Choir, formed by our Day Care patients, beamed with pride as their family members showered them with warm rounds of applause during their one-hour concert held on 14 December 2021. They performed a repertoire of English, Malay, Chinese and Hokkien songs for their loved ones, who were invited as guests. It was heart-warming when their family members presented them with a special trophy and flower bouquet as an encouragement for their hard work.



Our patient Mr Sim Eng Kuang with his daughter Sheyenne.



Our patient Mr Yap Leong Chuan with his daughter, Jasmine.

Due to Covid-19, the group have not held another concert since 2019. However, they had been practising every fortnight under the guidance of our music therapist and occupational therapist, and challenged themselves to learn a wider repertoire of songs, expand the range of music notes they play and include chords into the song arrangements. It was a joy for our patients to continue to learn and grow through the choir, and to finally be able to share the fruits of their labour with their loved ones through the concert.



Our Senior Boleh Choir performed a repertoire of English, Malay, Chinese and Hokkien songs for their loved ones.

JOYFULNESS



Haircut made me happy!

I would like to thank the therapist aide for his excellent and professional haircut. I had not ever been this happy for a very long time.

*Thanks a lot
Lots of hugs and kisses
Diana*

GIANT RABBITS IN ASSISI COURTYARD BRING MID-AUTUMN CHEER



The colourful rabbits brought cheer to our patients.

During Mid-Autumn Festival in September last year, 20 giant rabbits hopped into our Courtyard to bring cheer to our patients, caregivers and staff. They lit up and transformed into colourful rabbits in the evening, adding an element of delight and surprise.

A big thank you to City Developments Limited for bringing joy to our patients by sponsoring these lively decorations.

MASKED CAROLLERS BRING JOY TO THE WARDS

N95 masks did not stop our volunteer carollers Christian, James and Rowena from continuing their yearly tradition of bringing Christmas cheer to our patients, caregivers and staff in the wards! They mesmerised us with lovely Christmas carols, and even included Chinese oldies like 甜蜜蜜.



Our volunteer carollers continued their yearly tradition with N95 on.

Scan to hear our patient singing along with our volunteer carollers:



Scan to hear them sing.

CUSTOMISED JOY BOXES FOR DAY CARE PATIENTS

All I want for Christmas is...? Our Day Care patients' Christmas wish list included items that bring them comfort and convenience - standing fan, frying pans and utensils, kitchen blenders, and items related to their hobbies that bring them joy - big eye needle for beading, terrarium, box of colour pencils. The residents and volunteers from Tampines Changkat took time to find out our patients' wishes, and sent us 67 "Joy Boxes" to fulfil them. We would like to say a big thank you for bringing joy to our patients!



A big thank you to volunteers from Tampines Changkat.



Our Day Care patients are happy with their personalised Joy Box.



Meaningful and enjoyable

Dear staff of Assisi Day Care,

Thank you for your love, care & support that you have given to our mum, Shelly when she was at the day care these past few years. It was indeed meaningful & enjoyable for her. We appreciate the friendships that you have built with our mum to make her look forward to going to day care each day.

**With heartfelt gratitude,
Melvin & Mabel**



Our guests, (from left) Assisi Hospice Patron Ms Ho Ching, Sembcorp Industries Group Chief Financial Officer Mr Eugene Cheng, Assisi Hospice CEO Ms Choo Shiu Ling and Assisi Hospice Chairman Ms Anita Fam, launched the Christmas Light-up.

CHRISTMAS LIGHT-UP

Our patients, caregivers and friends from Sembcorp Industries ushered in the Christmas season together here in Assisi on 3 Dec 2021! They enjoyed a joyous Christmas medley by Marcus Lee and Qiao Han from Tin Box Group, accompanied by Eugene Seow on the cajon, and were serenaded by the Senior Boleh Chimes Choir formed by our patients, who performed the songs Silver Bells and Jingle Bells using special hand chimes. The evening ended with the light-up of our giant Christmas tree and sparkly fireworks. We would like to thank our co-organiser, Sembcorp Industries for their strong support and continuing their yearly tradition of bringing Christmas cheer to our patients despite the Covid-19 pandemic.



Our patient Mdm Soh enjoying the performance on stage.



Sembcorp volunteers Teo Han Ping (left) and Lee Seow Ping spreading Christmas cheer.



Marcus Lee and Qiao Han from Tin Box Group presented a Christmas medley.



GIFTING PRESENCE

Our volunteers continue to provide one of the most precious and valuable gifts to our patients – their presence.

GIFTING PRESENCE

Ensuring No One Dies Alone

Our volunteer Lydia Tan received the President’s Volunteerism & Philanthropy Awards 2021- People of Good (Senior) category. She started volunteering with Assisi Hospice in March 2015, and had spent a total of 1600 hours befriending and caring for our patients! Lydia came to know about Assisi Hospice when she befriended her friend’s 85-year-old uncle, who was ill for some time and was transferred to Assisi Hospice for palliative care. She witnessed the care and love given by the clinical team. She said, “The team was not just ‘doing their job’. The care came from their hearts.” Her friend’s uncle had made the remark that he thought that he was going to be alone during the last stage of his life journey, but it turned out to be his happiest days. This ignited her desire to be a volunteer at Assisi Hospice.



Lydia started volunteering with Assisi Hospice in March 2015.



It was a humbling experience to always be present and to love. It is not about doing but being with the other.

Lydia started as a van escort, accompanying patients to and from Assisi Hospice’s Day Care Centre in the van, and became a volunteer-carer in the wards after about 6 months, befriending patients and assisting with patient care duties such as bed sponging, diaper changing and feeding. She cares for patients in the palliative dementia ward, as well as young palliative paediatric patients. She is also a volunteer with the No One Dies Alone (NODA) programme, befriending patients with limited or no family support and accompanying them until the very end of their lives. Over the final 48 hours of the patient’s life, she and other NODA volunteers take turns to sit in vigil, so that the patient does not die alone.

She said, “Initially, there was a sense of loss when patients whom I have journeyed with passed on. Over time, I still grief when patients pass on, but I look at it as a gift and blessing



Lydia received the President's Volunteerism & Philanthropy Awards 2021- People of Good (Senior) category.

to have known the patient. I have many dear memories of my journey with patients. I was humbled by this kind gesture of a patient. Before leaving her, she took my hand, kissed it and said, ‘Thank you for everything, you are my sister.’ That was the last time I saw her as she passed on shortly after that visit. It was a humbling experience to always be present and to love. It is not about doing but being with the other.”

VOLUNTEERS DETERMINED TO CONTINUE SERVING WITH LOVE

As the infection control measures evolved, our volunteers involved in direct patient care and in No One Dies Alone programme were N95 mask-fitted, and received refresher training and were tested on their competency in infection control measures. Our volunteers also started to do ART testing every time they came to volunteer when ART testing for visitors became compulsory in July 2021. In N95 masks and PPE gowns, our volunteers were determined to continue serving with love.

For our volunteers who were unable to fulfil the requirements for regular on-premises volunteering, we created other opportunities for them to offer their service. Some of them provided food sponsorship for our Treat Trolley programme, which enabled us to bring local delights and other surprise tea-time treats to our patients and their caregivers; others helped with research support for our outreach efforts and remote data-entry.



Donned in N95 mask and PPE gown, our volunteer hairdresser continued serving our patients.

LENT AT ASSISI

Even though our regular volunteer recruitment was on-hold due to Covid-19 measures, we started Lent at Assisi in 2021 as an opportunity for the Catholic community to live out the meaning of Lent at Assisi. During the period of Lent in March and April, over 100 Catholics took part by offering their helping hand by volunteering at our wards, offering their wallet through donations, and offering their voice by increasing awareness of palliative care through their social media platforms.

About 40 of them signed up as volunteers at our “Kopi Delight” sessions; taking kopi/tea orders, making beverages and serving patients with love, or delivering goodie bags to our patients and their families at their homes.



Our volunteer at our “Kopi Delight” session serving patients with love.

It really opens up my heart that serving others, be it in small or big ways, can bring so much joy to the recipient.

Anne Goswami was one of the volunteers. She could not forget the care that her grandfather received at Assisi Hospice 30 years ago, and seized the chance to revisit Assisi as a volunteer for the “Kopi Delight” session. She said, “I am happy to do my small part to help. Seeing their loved ones around them was so heart-warming. It brought back many memories of my grandpa.”

The experience was memorable for some first-time volunteers. “It really opens up my heart that serving others, be it in small or big ways, can bring so much joy to the recipient,” said Helene Wong, parishioner of Church of St Mary of the Angels.

ADVENT AT ASSISI

A fan with remote control as it was challenging for her to move around at home due to mobility issues; mattresses and pillows to replace old ones; school shoes for his school-going children - these were some of the wishes our Home Care patients had for Christmas. We started Advent at Assisi, which enabled our volunteers to fulfil our Home Care patients’ wishes by purchasing the item according to their needs and delivering it right to their doorstep. Our volunteers who were unable to fulfil requirements for volunteering within the hospice premises found it meaningful to be able to bring care and comfort to our patients in a different way through this initiative.



Our volunteers fulfilled our Home Care patients’ wishes by purchasing the items according to their needs and delivering it right to their doorstep.



GROWTH

We strive to grow and develop ourselves to serve better.

GROWTH

AWARDS

We are happy to share that our colleagues have been honoured with these awards.

Nurses’ Merit Award 2021 Tan Shu Cing, Senior Staff Nurse, Home Care

This award is presented to deserving nurses for their outstanding performance and dedication to the profession.

Shu Cing shared her motivation for a career in nursing, “Being a palliative care nurse for 5 years, helping to alleviate the pain experienced by patients and honouring their preferences are important to me.

My most memorable patient was Mr T whom I met as a palliative home care nurse. I rushed to his home after receiving an urgent call from his wife close to end of the day. He was in severe pain and it didn’t go away even though I administered medication to him at regular intervals. Admission to the hospital was not preferred as his 9-year-old daughter would not be able to visit.

Our Home Care doctor rushed down and we managed Mr T’s symptoms till he was comfortable and could rest. We spent 4 hours with Mr T. Even though I was hungry, thirsty, and tired, I felt a sense of satisfaction. To me, this is what nursing is about – focusing on providing comfort to someone in need, above my own.”



Tan Shu Cing (left) with Chiew Cheng Fong, Director of Nursing.

Community Care Manpower Development Award

Four colleagues were awarded the Community Care Manpower Development Award 2021. This award is administered by the AIC and provides new entrants, mid-career switchers and current staff working in the Community Care sector with opportunities to pursue and grow a career. The four recipients were:



Linda Chew, Senior Staff Nurse, pursuing a Master of Nursing



Junnie Phang, Senior Staff Nurse, pursuing a Specialist Diploma in Palliative Care Nursing



Andy Tham, Head of Operations, pursuing a Graduate Diploma in Healthcare Management



Christina Ong, HR Executive, pursuing a Specialist Diploma in Workplace Counselling

We wish them all the best in their studies as they strive to upskill to better serve our patients and organisation.



POSTER PRESENTATION AT CONFERENCES

At a time when physical events and travelling were still restricted, our colleagues participated in local and international conferences virtually, contributing to greater knowledge in the palliative care sector worldwide through poster presentations.

Staff	Conference	Title of Poster
Dr Tan Su-Yen (Resident Physician)	International Forum on Quality & Safety in Healthcare Sydney	Anticipatory Prescribing in Terminal Care at Home
	Asia Pacific Hospice Palliative Care Conference (APHC) 2021	Addressing Feeding-related Errors and Dysphagia Management in an Inpatient Hospice Presentation
	7th Singapore Palliative Care Conference 2021	Use of Intravenous Antibiotics in the Inpatient Unit of Assisi Hospice
Calvin Pang (Art Therapist)	APHC 2021	A Hope Beyond Cure: A case study on the role of art therapy in bridging terminal patient's expectation and reality
	APHC 2021	Same Same but Different: A single case study on the overlapping role of art in an occupational therapist's and an art therapist's clinical practice
Calvin Pang (Art Therapist) and Sheena Low (Senior Occupational Therapist)	7th Singapore Palliative Care Conference 2021	Occupational and Art Therapy (OAT) collaborative approach: A case study on integrating clinical interventions in a hospice day care setting
Sheena Low (Senior Occupational Therapist)	7th Singapore Palliative Care Conference 2021	An exploratory study on the feasibility of telerehabilitation in a hospice day care setting
Vivian Wong (Art Therapist)	7th Singapore Palliative Care Conference 2021	Getting into Matters of Heart: Employing an Accessible Art Therapy Approach for a Person with Amyotrophic Lateral Sclerosis
Fong Seow Ying (Senior Pharmacist)	7th Singapore Palliative Care Conference 2021	Effectiveness of interventions to minimize medication errors related to transdermal Fentanyl

TRAINING

Our staff are precious to us. We hope to help each individual develop their expertise with a long-term perspective of their contribution to healthcare in Singapore. Our Franciscan values and the ethos of palliative care guide us in developing the perspective that we all share the same space and are responsible for the wellbeing of one another to grow and develop to our fullest potential. Training and coaching are structured and personalised in Assisi. We planned individual training roadmaps and formalised leadership development to enhance professional and personal development for all staff. We also developed more specialised training programmes.

In 2021, 5 nursing staff were sponsored for the Specialist Diploma in Palliative Care. Linda Chew, Senior Staff Nurse, Home care, was sponsored for full-time study of Master of Nursing at Alice Lee Centre for Nursing Studies. Two staff attended the virtual Bonny Method of Guided Imagery & Music, Level 2.



During the Advance Communication Workshop, participants were provided with a safe platform with authentic scenarios to learn through role playing.

Over 120 of our clinical colleagues progressed to the Advanced Communication Workshop, and learned to handle tricky conversations to support our patients and their families.

In palliative care, patients and families are often facing challenging times in their lives. Effective communication skills are essential to provide timely care and comfort to them. In 2020, most of our clinical and patient-facing staff, including nurses, doctors, therapists and social workers went through a series of beginner and intermediate Communications Training, which was specially developed and curated in-house to meet the needs of our staff. In May, April and October 2021, over 120 of our clinical colleagues progressed to the Advanced Communication Workshop, and learned to handle tricky

conversations to support our patients and their families, for example managing misalignment of expectations, responding to patient's request to hasten death, and responding to and managing demanding, angry, verbally aggressive and abusive behaviour from patients or family members. The curriculum was developed by an external trainer and customised based on our needs. Participants were provided with a safe platform with authentic scenarios to learn through role-play and exchanges with the trainer and colleagues in other departments.

Our nurturing goes beyond our staff. 39 clinical personnel were attached to Assisi in 2021. They comprised 26 local students (18 medical, 8 allied health students), 8 doctors and 5 clinical professionals.

We also had another 43 medical students from Duke-NUS Medical School who went through virtual training with Assisi, in place of physical clinical attachment.

We would like to thank the Diana Koh Foundation for their kind support of our training programme.



HAND IN HAND

We are grateful that the community has rallied together to walk with us as we journey with our patients and their loved ones.

HAND IN HAND



Board Member and Community Engagement Committee Chairman, Ms Fiona Rankine (1st from right) and Director of Nursing, Assisi Hospice, Ms Chiew Cheng Fong (1st from left) flagged off the fun walk for our patients.



The event received strong support from adidas Runners Singapore.

Source Straits Times, 2 July 2021

I RACE FOR NURSES

Nurses often “walk the extra mile” for patients. To care for patients with terminal illnesses, an Assisi Hospice nurse has to walk about 12 km per day. To celebrate Nurses’ Day, Assisi Hospice organised “I Race for Nurses” virtual run/walk to encourage the public to appreciate nurses by walking, running, and donating in July 2021. For every 100km covered, a \$100 voucher which could be redeemed for shoes was gifted to an Assisi nurse by adidas Singapore.

About 20 patients from Assisi Hospice took the lead in a fun walk at Assisi Hospice’s Courtyard on 1 July 2021 to launch the event, and clocked a total of 9 km to show appreciation to the nurses who provide care and comfort to them and their families.

74-year-old Tai Swee Heng is one of the patients of Assisi Hospice Day Care who joined the walk in a wheelchair. She has severe heart failure and requires long term oxygen support. Being wheelchair-bound for over 10 years with a limited social circle, she really appreciates the care and social interaction

4415 participants went the distance for our nurses and clocked over 300,000 km, exceeding our initial target.

with staff and other patients, and the therapy activities at Day Care. She said, “The nurses here are like my friends. I like to chat with them.”

We received strong support from the public. Over the period of a month, 4415 participants went the distance for our nurses and clocked over 300,000 km, exceeding our initial target. All Assisi nurses received a \$100 voucher each from Adidas Singapore, in celebration of Nurses’ Day 2021. A big thank you to all our participants! We would also like to show our deepest appreciation to supporters who raised funds or donated to enable us to bring care and comfort to our patients and their loved ones.



Private dining at Singapore's internationally acclaimed chef, Elsa Van Der Nest's home.

ASSISI DINNER 2021 – FIVE FOR GREATER GOOD

Amidst evolving dine-in restrictions due to Covid-19 measures, we are thankful to have held our Assisi Dinner with a new format – an intimate affair of tables of 5 in restaurants across the island from August to December 2021. More than 150 guests came together on separate occasions for a greater good and enjoyed cosy meals with their loved ones and friends over a smorgasbord of more than 10 curated private Chef tables, award-winning and most talked-about restaurants. All proceeds from the dinner went towards providing care and comfort for our patients and their loved ones.

We would like to thank the following partners for their support - Goodwood Park Hotel, Pan Pacific Hotel Singapore, Carlton Hotel Singapore, Elsa Van Der Nest, Violet Oon Singapore, PARKROYAL COLLECTION Marina Bay and Meatsmith Singapore.



One of the dinners included a walking tour of the Georgette Chen Exhibition 'At Home in the World' at the National Gallery Singapore, together with Georgette's grandniece, Hilda Loh.

ASSISI FUN DAY 2021 – E-EDITION

With safe-distancing still being the norm and travelling being restricted, we brought back the E-Edition of Assisi Fun Day in 2021. From 7-17 Oct 2021, over 4,000 users made 17,000 visits to www.assisifunday.sg to shop and eat for good, enjoying over 50 brands of delicious food and exciting products from Asia, America and Europe. Visitors to the website also had fun “chopping” virtual passports and winning prizes. All proceeds from the event went towards providing care and comfort to our patients and their loved ones. We are thankful to the visitors to our website who shopped and ate for good, and our partner merchants for their strong support.

We would like to thank the following partners for their support - City Developments Limited and their partners, Hong Leong Finance Ltd, Tung Lok Millennium Pte Ltd, foodpanda, Les Amis Group, Pavilion Capital, Marymount Convent School Teachers & Parents, Millennium & Copthorne Hotels Ltd and Mount Alvernia Executive Team.



Over 4,000 users made 17,000 visits to www.assisifunday.sg to shop and eat for good.



Visitors to the site enjoyed over 50 brands of delicious food and exciting products from Asia, America and Europe.



www.assisifunday.sg website.



Simply Live resident singers and musicians raised funds for Assisi Hospice through a Mandopop concert "Simply Live by Tin Box – GOING LIVE".

GIFT OF MUSIC BY TIN BOX GROUP SINGAPORE

Music brings comfort and the ability to choose the music you love brings joy. Tin Box Group Singapore held its first ever live Mandopop concert "Simply Live by Tin Box – GOING LIVE" on 4th September 2021 at Capitol Theatre featuring Simply Live resident singers and musicians, to celebrate the opening of its fourth outlet at NTUC Trades Union House at Bras Basah. All proceeds from the concert were donated to Assisi Hospice for purchase of radios for our patients in the wards. A big thank you to Tin Box for presenting the gift of music to our patients!



Our CEO, Ms Choo Shiu Ling (right), presented Mrs Pandora Ip, President of Singapore Sogetsu Association with an award to thank them for their efforts.

SINGAPORE SOGETSU ASSOCIATION RAISED FUNDS IN CELEBRATION OF ITS 55TH ANNIVERSARY

In celebration of its 55th anniversary, Singapore Sogetsu Association raised over \$70,000 for Assisi Hospice through their various fundraising activities held last year. With the safe distancing guidelines in place, most of the activities were held online. Activities include an online Ikebana Exhibition, online Ikebana Master Class by Mr Ken Katayama and physical event "Joyful Blossoms Charity Award Ceremony cum Floral Demonstration". Mrs Pandora Ip, President of Singapore Sogetsu Association, and Mr Bernard Tay, Vice President of Singapore Sogetsu Association showcased their skills and collaborated on a large centrepiece on stage for the physical event. Our CEO, Ms Choo Shiu Ling, presented Singapore Sogetsu Association with an award to thank them for their efforts.

FINANCIAL STATEMENTS

DIRECTORS' STATEMENT

We hereby submit this annual report to the members of the Company together with the audited financial statements for the financial year ended 31 December 2021.

In our opinion:

- (a) the financial statements set out on pages 63 to 95 are drawn up, so as to give a true and fair view of the balance sheet of the Company as at 31 December 2021 and the financial activities and cash flows of the Company for the year ended on that date, in accordance with the provisions of the Companies Act 1967, the Charities Act, Chapter 37 and other relevant regulations ('the Charities Act and Regulations') and Charities Accounting Standards; and
- (b) at the date of this statement, there are reasonable grounds to believe that the Company will be able to pay its debts as and when they fall due.

The Board of Directors has, on the date of this statement, authorised these financial statements for issue.

Directors

The directors in office at the date of this statement are as follows:

Fam Siu Ping Anita
 Teo Liang Huat Thomas
 Anthony Mallek
 Beatrice Chen Bea Chuan
 Choo Wee Jin Philip
 Jeffrey Cheong Hwee Han
 Linus Tham Wai Chung
 Lita Chew Sui Tjien
 Lynna Chandra
 Nagaraj Sivaram
 Philip Yap Lin Kiat
 Rankine Fiona Audrey
 Trillion So
 Wong Yit Yeng (Huang YueYing)

Under Article 9 of its Memorandum of Association, the members of the Company guarantee to contribute a sum not exceeding \$1 each to the assets of the Company in the event of it being wound up. The members of the Company are Sister Leonida Lee Siew Lian, Sister Anne Goh Bee Kew, Sister Jane Margaret Bertelsen and Sister Helena Mc Evilly.

DIRECTORS' STATEMENT (CONT'D)

Directors' interests

The Company has no share capital and its member's liability is limited by guarantee.

Neither at the end of, nor at any time during the financial year, was the Company a party to any arrangement whose objects are, or one of whose objects is, to enable the directors of the Company to acquire benefits by means of the subscription to or acquisition of debentures of the Company or any other body corporate.

Auditors

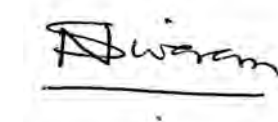
The auditors, KPMG LLP, have indicated their willingness to accept re-appointment.

On behalf of the Board of Directors



Teo Liang Huat Thomas
Director

3 June 2022



Nagaraj Sivaram
Director

INDEPENDENT AUDITORS’ REPORT

Members of the Company
Assisi Hospice (A Company Limited by Guarantee)

Report on the financial statements

Opinion

We have audited the accompanying financial statements of Assisi Hospice (the Company), which comprise the balance sheet as at 31 December 2021, the statement of financial activities and statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies, as set out on pages 63 to 95.

In our opinion, the accompanying financial statements are properly drawn up in accordance with the provisions of the Companies Act 1967 (‘the Act’), the Charities Act, Chapter 37 and other relevant regulations (‘the Charities Act and Regulations’) and Charities Accounting Standards so as to give a true and fair view of the state of affairs of the Company as at 31 December 2021 and of the financial activities and cash flows of the Company for the year ended on that date.

Basis for opinion

We conducted our audit in accordance with Singapore Standards on Auditing (‘SSAs’). Our responsibilities under those standards are further described in the ‘Auditors’ responsibilities for the audit of the financial statements’ section of our report. We are independent of the Company in accordance with the Accounting and Corporate Regulatory Authority Code of Professional Conduct and Ethics for Public Accountants and Accounting Entities (‘ACRA Code’) together with the ethical requirements that are relevant to our audit of the financial statements in Singapore, and we have fulfilled our other ethical responsibilities in accordance with these requirements and the ACRA Code. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Other information

Management is responsible for the other information contained in the annual report. Other information is defined as all information in the annual report other than the financial statements and our auditors’ report thereon.

We have obtained all other information prior to the date of this auditors’ report.

Our opinion on the financial statements does not cover the other information and we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

INDEPENDENT AUDITORS’ REPORT (CONT’D)

Members of the Company
Assisi Hospice (A Company Limited by Guarantee)

Responsibilities of management and directors for the financial statements

Management is responsible for the preparation of financial statements that give a true and fair view in accordance with the provisions of the Act, the Charities Act and Regulations and Charities Accounting Standards, and for devising and maintaining a system of internal accounting controls sufficient to provide a reasonable assurance that assets are safeguarded against loss from unauthorised use or disposition; and transactions are properly authorised and that they are recorded as necessary to permit the preparation of true and fair financial statements and to maintain accountability of assets.

In preparing the financial statements, management is responsible for assessing the Company’s ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the Company or to cease operations, or has no realistic alternative but to do so.

The directors’ responsibilities include overseeing the Company’s financial reporting process.

Auditors’ responsibilities for the audit of the financial statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors’ report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with SSAs will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with SSAs, we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal controls.
- Obtain an understanding of internal controls relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Company’s internal controls.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.

INDEPENDENT AUDITORS’ REPORT (CONT’D)

Members of the Company
Assisi Hospice (A Company Limited by Guarantee)

- Conclude on the appropriateness of management’s use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Company’s ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditors’ report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditors’ report. However, future events or conditions may cause the Company to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with the directors regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal controls that we identify during our audit.

Report on other legal and regulatory requirements

In our opinion, the accounting and other records required be kept by the Company have been properly kept in accordance with the provisions of the Charities Act.

During the course of our audit, nothing has come to our attention that causes us to believe that during the year:

- (a) the Company has not used the donation moneys in accordance with its objectives as required under Regulation 11 of the Charities (Institutions of a Public Character) Regulations; and
- (b) the Company has not complied with the requirements of Regulation 15 (fund-raising expenses) of the Charities (Institutions of a Public Character) Regulations.

KPMG LLP

KPMG LLP
Public Accountants and
Chartered Accountants

Singapore
3 June 2022

BALANCE SHEET

As at 31 December 2021

	Note	2021 \$'000	2020 \$'000
Non-current assets			
Property, plant and equipment	4	46,077	48,473
Investments	5	74,178	71,497
		<u>120,255</u>	<u>119,970</u>
Current assets			
Inventories	6	53	49
Trade and other receivables	7	9,996	20,154
Cash and cash equivalents	8	62,758	41,643
		<u>72,807</u>	<u>61,846</u>
Total assets		<u>193,062</u>	<u>181,816</u>
Funds			
Restricted funds			
Community Silver Trust Fund	9	14,781	18,468
Paediatric Palliative Care Programme	10	674	608
Patient Assistance Fund	11	41	130
Respectance Fund	12	53	17
Singapore Ireland Fund	13	34	34
Gym Tonic Fund	14	19	9
Ingot In-Patient Fund	15	–	8
President’s Challenge Fund	16	–	–
Endowment Fund	17	62,314	35,177
Unrestricted funds			
Accumulated Fund		47,598	57,691
Staff Welfare Fund	18	970	897
Building Fund	19	44,450	47,258
Sinking Fund	20	16,252	16,407
Total funds		<u>187,186</u>	<u>176,704</u>
Current liabilities			
Trade and other payables	21	5,876	5,112
Total liabilities		<u>5,876</u>	<u>5,112</u>
Total funds and liabilities		<u>193,062</u>	<u>181,816</u>

The accompanying notes form an integral part of these financial statements.

STATEMENT OF FINANCIAL ACTIVITIES

Year ended 31 December 2021

Note	2021				2020			
	Total	Total	Endowment	Total	Total	Total	Endowment	Total
	Unrestricted	Restricted	Fund	Funds	Unrestricted	Restricted	Fund	Funds
	\$'000	\$'000	\$'000	\$'000	\$'000	\$'000	\$'000	\$'000
As at 1 January	122,253	19,274	35,177	176,704	119,748	15,834	20,000	155,582
Income								
Income from generated fund								
Voluntary income								
- Donation - General	6,009	56	-	6,065	6,820	165	-	6,985
- Donation in kind	-	-	-	-	8	-	-	8
- Donation - Mount Alvernia Hospital	588	-	-	588	588	-	-	588
- Government Grant/Sponsorship received/receivable	2,852	5,608	-	8,460	4,569	12,803	-	17,372
	9,449	5,664	-	15,113	11,985	12,968	-	24,953
Fundraising activities	6,438	102	-	6,540	5,433	-	-	5,433
Investment income	1,311	-	2,290	3,601	3,527	-	177	3,704
	17,198	5,766	2,290	25,254	20,945	12,968	177	34,090
Income from charitable activities								
- Government grants	10,005	-	-	10,005	10,318	-	-	10,318
- Patient fees	7,262	-	-	7,262	6,277	-	-	6,277
	17,267	-	-	17,267	16,595	-	-	16,595
Total income	34,465	5,766	2,290	42,521	37,540	12,968	177	50,685
Expenditure								
Cost of generating funds								
- Fundraising expenses	299	-	-	299	223	-	-	223
- Investment expense	72	-	153	225	186	-	-	186
	371	-	153	524	409	-	-	409
Charitable activities								
- Salaries and related costs	8,581	7,938	-	16,519	8,742	6,733	-	15,475
- Contributions to defined contribution plan	1,390	321	-	1,711	1,369	183	-	1,552
- Programme expenses	12,273	895	-	13,168	10,530	1,488	-	12,018
	22,244	9,154	-	31,398	20,641	8,404	-	29,045

The accompanying notes form an integral part of these financial statements.

STATEMENT OF FINANCIAL ACTIVITIES (CONT'D)

Year ended 31 December 2021

Note	2021				2020			
	Total	Total	Endowment	Total	Total	Total	Endowment	Total
	Unrestricted	Restricted	Fund	Funds	Unrestricted	Restricted	Fund	Funds
	\$'000	\$'000	\$'000	\$'000	\$'000	\$'000	\$'000	\$'000
Governance costs								
- Professional fees	57	-	-	57	52	-	-	52
- Insurance	55	-	-	55	51	-	-	51
- Others	5	-	-	5	6	-	-	6
	117	-	-	117	109	-	-	109
Total expenditure	22,732	9,154	153	32,039	21,159	8,404	-	29,563
Net income/(expenditure) before tax expense	11,733	(3,388)	2,137	10,482	16,381	4,564	177	21,122
Income tax expense	-	-	-	-	-	-	-	-
Net income/(expenditure) for the year	11,733	(3,388)	2,137	10,482	16,381	4,564	177	21,122
Transfers								
- Transfer between funds								
• Restricted to unrestricted funds	284	(284)	-	-	151	(151)	-	-
• Unrestricted to endowment funds	(25,000)	-	25,000	-	(15,000)	-	15,000	-
- Fund close out	-	-	-	-	973	(973)	-	-
	(24,716)	(284)	25,000	-	(13,876)	(1,124)	15,000	-
Net movement in funds	(12,983)	(3,672)	27,137	10,482	2,505	3,440	15,177	21,122
As at 31 December	109,270	15,602	62,314	187,186	122,253	19,274	35,177	176,704

For details on movement in financial activities of the individual funds, please refer to Appendix A.

The accompanying notes form an integral part of these financial statements.

STATEMENT OF CASH FLOWS

Year ended 31 December 2021

	Note	2021 \$'000	2020 \$'000
Cash flows from operating activities			
Net income for the year		10,482	21,121
<i>Adjustments for:</i>			
Depreciation of property, plant and equipment	4	3,416	3,388
Interest income from time deposits	23	(142)	(400)
Interest income from investments	23	(366)	(659)
Interest income from time deposits – Endowment Fund	23	(570)	(177)
Gain on disposal of investments	23	(2,523)	(2,468)
		<u>10,297</u>	<u>20,805</u>
<i>Changes in:</i>			
- Trade and other receivables		10,184	(9,597)
- Trade and other payables		764	476
- Inventory		(4)	(14)
Net cash from operating activities		<u>21,241</u>	<u>11,670</u>
Cash flows from investing activities			
Interest received from time deposits		149	593
Interest received from investments		903	840
Purchase of property, plant and equipment		(1,020)	(614)
Proceeds from disposal of investments		40,340	57,313
Purchase of investments		(40,498)	(86,370)
Net cash used in investing activities		<u>(126)</u>	<u>(28,238)</u>
Net increase/(decrease) in cash and cash equivalents		21,115	(16,568)
Cash and cash equivalents at beginning of the year		41,643	58,211
Cash and cash equivalents at end of the year	8	<u>62,758</u>	<u>41,643</u>

NOTES TO THE FINANCIAL STATEMENTS

These notes form an integral part of the financial statements.

The financial statements were authorised for issue by the Board of Directors on 3 June 2022.

1 Domicile and activities

Assisi Hospice (the Company) is a charitable organisation registered in the Republic of Singapore and has its principal place of business at 832 Thomson Road, Singapore 574627.

The principal activities of the Company are to provide in-patient hospice services for chronically sick and terminally ill patients as well as day care and home care services.

The Company is approved as an institution of a public character (IPC) under the provisions of the Income Tax Act. The Company is registered as a charity under the Charities Act, Chapter 37.

2 Basis of preparation

2.1 Statement of compliance

The financial statements have been prepared in accordance with the Charities Accounting Standards (CAS).

2.2 Basis of measurement

The financial statements have been prepared on the historical cost basis.

2.3 Functional and presentation currency

The financial statements are presented in Singapore dollars which is the Company's functional currency. All financial information presented in Singapore Dollar has been rounded to the nearest thousand, unless otherwise stated.

NOTES TO THE FINANCIAL STATEMENTS (CONT'D)

2.4 Use of estimates and judgements

The preparation of the financial statements in conformity with CAS requires management to make judgements, estimates and assumptions that affect the application of accounting policies and the reported amounts of assets, liabilities, income and expenses. Actual results may differ from these estimates.

Estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognised in the period in which the estimates are revised and in any future periods affected.

3 Significant accounting policies

The accounting policies set out below have been applied consistently to all periods presented in these financial statements.

3.1 Foreign currency transactions

Transactions in foreign currencies are translated to Singapore dollars at the exchange rate at the dates of the transactions. Monetary assets and liabilities denominated in foreign currencies at the reporting date are translated to the functional currency at the exchange rate at that date. Non-monetary assets and liabilities denominated in foreign currencies that are measured at fair value are translated to the functional currency at the exchange rate at the date that the fair value was determined. Foreign currency differences arising from translation are recognised in the statement of financial activities.

3.2 Property, plant and equipment

Recognition and measurement

Items of property, plant and equipment are measured at cost less accumulated depreciation and accumulated impairment losses.

Cost includes expenditure that is directly attributable to the acquisition of the asset. Purchased software that is integral to the functionality of the related equipment is capitalised as part of that equipment.

If significant parts of an item of property, plant and equipment have different useful lives, they are accounted for as separate items (major components) of property, plant and equipment.

Any gain or loss on disposal of an item of property, plant and equipment is recognised in the statement of financial activities.

NOTES TO THE FINANCIAL STATEMENTS (CONT'D)

Subsequent costs

The cost of replacing a component of an item of property, plant and equipment is recognised in the carrying amount of the item if it is probable that the future economic benefits embodied within the component will flow to the Company and its cost can be measured reliably. The carrying amount of the replaced component is derecognised. The costs of the day-to-day servicing of property, plant and equipment are recognised in the statement of financial activities as incurred.

Depreciation

Depreciation is based on the cost of an asset less its residual value. Significant components of individual assets are assessed and if a component has a useful life that is different from the remainder of that asset, that component is depreciated separately.

Depreciation is recognised as expenditure in the statement of financial activities on a straight-line basis over the estimated useful lives of each part of an item of property, plant and equipment.

The estimated useful lives for the current and comparative years are as follows:

Building	30 years
Renovations	3 years
Furniture and fittings	5 years
Office and other equipment	4 to 10 years
Motor vehicles	4 years
Plant and machinery	4 to 10 years
Medical equipment	6 years
Computer equipment	3 to 10 years

Assets under construction are stated at cost. Expenditure relating to assets under construction are capitalised when incurred. No depreciation is provided until the assets under construction are completed and the related property, plant and equipment are available for use.

Depreciation methods, useful lives and residual values are reviewed, and adjusted as appropriate, at each reporting date.

NOTES TO THE FINANCIAL STATEMENTS (CONT'D)

3.3 Trade and other receivables

Trade and other receivables excluding prepayments are initially recognised at their transaction price, excluding transaction costs, if any. Transaction costs are recognised as expenditure in the statement of financial activities as incurred.

Prepayments are initially recognised at the amount paid in advance for the economic resources expected to be received in the future.

After initial recognition, trade and other receivables excluding prepayments are measured at cost less any accumulated impairment losses. Prepayments are measured at the amount paid less the economic resources received or consumed during the financial period.

3.4 Cash and cash equivalents

Cash and cash equivalents comprise cash balances and time deposits with financial institutions.

3.5 Investments

Investments are recognised at cost less any accumulated impairment losses.

3.6 Inventories

Inventories comprising medical supplies, are measured at the lower of cost and net realisable value. Cost is calculated using weighted average cost formula and comprises all costs of purchase and other cost incurred in bringing the inventories to their present location and condition. Net realisable value is the estimated selling price in the ordinary course of business, less the estimated costs necessary to make the sale.

3.7 Trade and other payables

Trade and other payables excluding accruals are recognised at their transaction price, excluding transaction costs, if any, both at initial recognition and at subsequent measurement. Transaction costs are recognised as expenditure in the statement of financial activities as incurred. Accruals are recognised at the best estimate of the amount payable.

NOTES TO THE FINANCIAL STATEMENTS (CONT'D)

3.8 Employee benefits

Defined contribution plans

A defined contribution plan is a post-employment benefit plan under which an entity pays fixed contributions into a separate entity and will have no legal or constructive obligation to pay further amounts. Obligations for contributions to defined contribution plans are recognised as an expense in the statement of financial activities as incurred.

Short-term employee benefits

Short-term employee benefit obligations are measured on an undiscounted basis and are expensed as the related service is provided.

A liability is recognised for the amount expected to be paid under short-term cash bonus or profit-sharing plans if the Company has a present legal or constructive obligation to pay this amount as a result of past service provided by the employee and the obligation can be estimated reliably.

3.9 Income

Income are included in the statement of financial activities when the following three factors are met:

- the Company becomes entitled to the income;
- the management are virtually certain that they will receive the income; and
- the monetary value can be measured with sufficient reliability.

Patient fees

Provided it is probable that the economic benefits will flow to the Company, and that the income and expenses, if applicable, can be measured reliably, income from patients and related services is recognised when the services are rendered. Revenue excludes goods and services taxes or other taxes.

Government grants

The Company's income comprises grants from the government to meet the Company's operating expenses and to fund the Company's capital expenditure.

Grants from the government are recognised as income in the statement of financial activities where there is reasonable assurance that they will be received and the conditions attached to them will be complied with. Where uncertainty exists as to whether the Company can meet the conditions, the grants that are received are deferred as a liability until there is sufficient evidence that the conditions attached can be met.

NOTES TO THE FINANCIAL STATEMENTS (CONT'D)

Donation and fundraising income

Donations and revenue from fundraising are recognised as income in the accounting period in which they are received or receivable.

Donation in kind

Donation in kind are recorded as donation income at an amount equivalent to the estimated value of the items donated when the value can be reasonably and reliably estimated.

Investment income

Investment income comprises interest income on funds invested, and net realised gains/losses on disposal of investments. Interest income is recognised on an accrual basis, using the effective interest method.

3.10 Expenditure

All expenditure are accounted for on an accrual basis and has been classified under headings that aggregate all cost related to that activity. Cost comprises direct expenditure including direct staff costs attributable to the activity. Where costs cannot be wholly attributed to an activity, they have been apportioned on a basis consistent with the use of resources. These include overheads like utilities, amortisation of leasehold improvements and support costs.

Costs of generating funds

Costs of generating funds include the costs of activities carried out to generate income, which will be used to undertake charitable activities.

Charitable activities

Charitable activities include both direct and related support costs relating to general running of the Company for service delivery.

Governance costs

Governance costs include those costs associated with meeting constitutional and statutory requirements of the Company. It includes insurance, related staff cost, audit and professional fees related to the governance infrastructure and in ensuring public accountability of the Company.

NOTES TO THE FINANCIAL STATEMENTS (CONT'D)

3.11 Impairment

- (i) Inventories

The Company assesses at each reporting date whether any inventories are impaired. The Company makes the assessment by comparing the carrying amount of each item of inventory with its selling price less costs to complete and sell. If an item of inventory is impaired, the Company reduces the carrying amount of the inventory to its selling price less costs to complete and sell. The Company recognises the reduction as impairment loss immediately in the statement of financial activities.

- (ii) Financial assets

Trade and other receivables

At the end of each reporting period, the Company assess whether there is objective evidence of impairment of trade and other receivables. If there is objective evidence of impairment, the Company recognises an impairment loss immediately in the statement of financial activities.

An impairment loss in respect of trade and other receivables is calculated as the difference between its carrying amount and the undiscounted future cash flows that the Company expects to receive from trade and other receivables. Losses are recognised in the statement of financial activities.

Investments

Impairment loss in respect of investments is calculated as the difference between its carrying amount and the best estimate of the amount that the Company would receive from investment if it was to be sold at the reporting date. Impairment losses are recognised in the statement of financial activities.

3.12 Funds structure

Unrestricted funds are available for use at the discretion of the management in furtherance of the general objectives of the Company.

Restricted funds are subjected to restrictions on their expenditure imposed by the donor or through the terms of an appeal.

The endowment fund is a restricted fund and an expendable endowment fund.

NOTES TO THE FINANCIAL STATEMENTS (CONT'D)

4 Property, plant and equipment

	Building \$'000	Renovations \$'000	Furniture and fittings \$'000	Office and other equipment \$'000	Motor vehicles \$'000	Plant and machinery \$'000	Medical equipment \$'000	Computer equipment \$'000	Assets under construction \$'000	Total \$'000
Cost										
At 1 January 2020	48,054	–	642	2,586	393	6,619	817	3,342	–	62,453
Additions	–	6	7	–	–	–	55	155	391	614
Write-off	–	–	(3)	–	–	–	–	–	–	(3)
Disposals	–	–	(27)	–	–	–	(2)	(15)	–	(44)
Reclassification	–	–	–	–	–	–	–	304	(304)	–
At 31 December 2020	48,054	6	619	2,586	393	6,619	870	3,786	87	63,020
Additions	–	–	–	–	9	17	57	149	788	1,020
Disposals	–	–	–	–	–	–	(3)	(264)	–	(267)
Reclassification	–	10	–	–	–	–	–	184	(194)	–
At 31 December 2021	48,054	16	619	2,586	402	6,636	924	3,855	681	63,773
Accumulated depreciation										
At 1 January 2020	4,805	–	384	883	226	1,986	380	2,541	–	11,205
Depreciation charge for the year	1,602	–	113	305	77	663	130	498	–	3,388
Disposals	–	–	(2)	–	–	–	–	–	–	(2)
Write-off	–	–	(27)	–	–	–	(2)	(15)	–	(44)
At 31 December 2020	6,407	–	468	1,188	303	2,649	508	3,024	–	14,547
Depreciation charge for the year	1,602	2	105	291	49	664	140	563	–	3,416
Disposals	–	–	–	–	–	–	(3)	(264)	–	(267)
At 31 December 2021	8,009	2	573	1,479	352	3,313	645	3,323	–	17,696
Carrying amounts										
At 31 December 2020	41,647	6	151	1,398	90	3,970	362	762	87	48,473
At 31 December 2021	40,045	14	46	1,107	50	3,323	279	532	681	46,077

NOTES TO THE FINANCIAL STATEMENTS (CONT'D)

5 Investments

	2021 \$'000	2020 \$'000
Money market securities	–	20,001
Quoted debt securities	15,879	14,370
Quoted equity securities	8,782	6,155
Collective investment schemes	49,480	30,885
Exchange-traded index put options	37	86
	<u>74,178</u>	<u>71,497</u>

The Company's fund managers are Lion Global Investors Limited (LGI), Fullerton Fund Management Company Ltd (FFMC) and Schroder Investment Management (S) Ltd which was appointed on 3 November 2021.

The movements of the investments are as follows:

	2021 \$'000	2020 \$'000
At 1 January	71,497	39,971
Additions	40,498	86,371
Disposals	(37,817)	(54,845)
At 31 December	<u>74,178</u>	<u>71,497</u>

As at 31 December 2021, the Company's investments in debt securities bear interest rates ranging from 1.38 % and 5.38% (2020: 1.65% and 5.38%). Among the investments held by the Company, \$56,959,218 (2020: \$61,064,049) of the investments relates to investment assets in Singapore. As at reporting date, the aggregate market value of these investments is approximately \$76 million (2020: \$75 million). The exchange-traded index put options are traded on the US Chicago Board Options Exchange and are entered into to hedge the equity exposure of the portfolio.

NOTES TO THE FINANCIAL STATEMENTS (CONT'D)

6 Inventories

	2021 \$'000	2020 \$'000
Medical supplies	53	49

7 Trade and other receivables

	2021 \$'000	2020 \$'000
Trade receivables	1,482	1,235
Allowance for doubtful trade receivables	(54)	(54)
Net receivables	1,428	1,181
Amount due from Ministry of Health	7,826	18,319
Fund receivable from third parties	100	7
Other receivables	31	17
Deposits	260	286
Dividend receivable	5	–
Interest receivable	267	241
Prepayments	79	103
	9,996	20,154

The Company's primary exposure to credit risk arises through its trade receivables and fund receivable from third parties. Concentration of credit risk relating to the trade receivables is limited due to the Company's many varied patient. No significant risk exposure is expected to arise from the fund receivable from third parties. The Company's historical experience in the collection of accounts receivable falls within the recorded allowances. Due to these factors, management believes that no additional credit risk beyond the amounts provided for collection losses, if any, is inherent in the Company's trade receivables.

NOTES TO THE FINANCIAL STATEMENTS (CONT'D)

8 Cash and cash equivalents

	2021 \$'000	2020 \$'000
Cash at bank	18,691	13,035
- Cash balance held with fund managers	2,358	1,972
- Cash at bank and in hand	16,333	11,063
Time deposits with financial institutions	44,067	28,608
- Held by the Company	44,067	28,608
Cash and cash equivalents in the statement of cash flows	62,758	41,643

The weighted average effective interest rate per annum relating to cash and cash equivalents at the reporting date is 0.28% (2020: 0.83%). Interest rates are re-priced at intervals of three, six, nine and twelve months.

Included in the cash and cash equivalents is an aggregate of \$10,013,777 (2020: \$6,574,190) which is subject to usage restriction imposed by the donors (see restricted funds in notes 9 to 16).

NOTES TO THE FINANCIAL STATEMENTS (CONT'D)

9 Community Silver Trust Fund

	2021 \$'000	2020 \$'000
Balance at 1 January	18,468	13,993
Grant from the Community Silver Trust	5,588	12,700
Expenditure	(8,979)	(8,121)
Fund Transfer	(296)	(104)
Balance at 31 December	14,781	18,468

The fund is represented by:

Amount due from Ministry of Health	5,588	12,700
Cash and cash equivalents	9,193	5,768
	14,781	18,468

The Community Silver Trust is a scheme whereby the government will provide a matching grant of one dollar for every donation dollar raised by eligible organisations. The objectives are to encourage more donations and provide additional resources for the service providers in the Intermediate and Long Term Care Sector and to enhance capabilities and provide value-added services to achieve affordable and higher quality care.

Expenditure incurred for the year ended 31 December 2021 includes utilisation of \$8,203,265 (2020: \$6,751,076) for staff related costs for doctors, nurses and allied healthcare workers.

10 Paediatric Palliative Care Programme

	2021 \$'000	2020 \$'000
The fund is represented by:		
Cash and cash equivalents	674	608

The Paediatric Palliative Care Programme was established in 2005 to provide paediatric palliative care to the terminally ill children and their families.

During the year, the Company received donations amounting to \$66,180 (2020: \$Nil) and utilised \$Nil (2020: \$23,979) from the fund to provide paediatric palliative care to the terminally ill children.

NOTES TO THE FINANCIAL STATEMENTS (CONT'D)

11 Patient Assistance Fund

	2021 \$'000	2020 \$'000
The fund is represented by:		
Cash and cash equivalents	41	130

The Patient Assistance Fund was set up in 2010 to assist lower income needy patients and their families with immediate needs such as, transportation including ambulance, food and milk feeds, consumables and any other needs as deemed necessary.

During the year, the Company utilised \$89,022 (2020: \$58,392) from the fund to help needy patients.

12 Respectance Fund

	2021 \$'000	2020 \$'000
The fund is represented by:		
Cash and cash equivalents	53	17

The Respectance Fund was set up in 2011 with the desire to respect and fulfil the preference of our patients to die in their own homes. This fund also provides short-term financial help for needy families whose primary breadwinner is facing death.

During the year, the Company received donations amounting to \$35,900 (2020: \$Nil) and transferred \$20,000 (2020: \$Nil) from Accumulated Fund to the Respectance Fund. \$19,585 (2020: \$21,173) was utilised from the fund to help needy families.

13 Singapore Ireland Fund

	2021 \$'000	2020 \$'000
The fund is represented by:		
Cash and cash equivalents	34	34

The fund was set up in 2015 with the objective to support palliative nursing care training.

NOTES TO THE FINANCIAL STATEMENTS (CONT'D)

14 Gym Tonic Fund

	2021 \$'000	2020 \$'000
The fund is represented by:		
Cash and cash equivalents	19	9
The objective of the fund is to support palliative nursing care training through purchasing advanced gym equipment and software to improve the functional abilities of patients.		
During the year, the Company has allocated \$20,000 (2020: \$Nil) into the Gym Tonic Fund from the grant received from Lien Foundation (see note 21). In addition, the Company utilised \$10,172 (2020: \$9,994) from the fund.		

15 Ingot In-Patient Fund

	2021 \$'000	2020 \$'000
The fund is represented by:		
Cash and cash equivalents	-	8
This fund was established in 2018 with the objective to computerise the inpatient clinical records and to enable the clinical team to access patient health information electronically.		
During the year, the Company utilised \$200 (2020: \$Nil) from the fund and transferred \$7,560 (2020: \$Nil) to the Accumulated fund for the purpose of enhancements to the Ingot Inpatient system.		

NOTES TO THE FINANCIAL STATEMENTS (CONT'D)

16 President's Challenge Fund

	2021 \$'000	2020 \$'000
The fund is represented by:		
Cash and cash equivalents	-	-
This fund was established in May 2020 with the objective to subsidise the manpower costs to provide palliative care for the Day Care patients.		
During the year, the Company received grants amounting to \$56,304 (2020: \$165,000) and fully utilised amounts of \$56,304 (2020: \$165,000) from the fund.		

17 Endowment Fund

	2021 \$'000	2020 \$'000
The fund is represented by:		
Investments	62,314	20,000
Cash and cash equivalents	-	15,177
	62,314	35,177
The fund was set up with the objective to create a new ongoing source of income to enhance the long term financial viability to cater for organisational expansion and growth.		
During the year, the fund yielded \$2,137,215 (2020: \$176,737) in net returns and \$25,000,000 (2020: \$15,000,000) was transferred from Accumulated Fund to the Endowment Fund.		

NOTES TO THE FINANCIAL STATEMENTS (CONT'D)

18 Staff Welfare Fund

	2021 \$'000	2020 \$'000
The fund is represented by:		
Cash and cash equivalents	970	897
The fund was set up in 2012. The objective of the fund is to offer a one-off financial aid for the death of a spouse, child or parent of any staff, to help staff when there is an urgent and unexpected need, to set aside some funds for group activities and subscription of corporate membership to places of interest for staff.		
During the year, the Company received donations and grants amounting to \$156,776 (2020: \$163,304) and utilised \$83,983 (2020: \$572) from the fund for staff activities.		

19 Building Fund

	2021 \$'000	2020 \$'000
The fund is represented by:		
Property, plant and equipment	44,450	47,258
During the year, the Company incurred depreciation expense of \$2,808,322 (2020: \$2,808,322), included within programme expenses.		
The hospice building held by the Company is for general and not restricted purpose.		

NOTES TO THE FINANCIAL STATEMENTS (CONT'D)

20 Sinking Fund

	2021 \$'000	2020 \$'000
The fund is represented by:		
Cash and cash equivalents	16,252	16,407
This fund was established in 2018 with the objective to meet the needs of replacing systems and maintaining the building over a 10-year period.		
During the year, the Company utilised \$155,581 (2020: \$92,935) from the fund of which \$17,335 (2020: \$NIL) was transferred to Accumulated fund for the purpose of depreciation, replacements and maintenance to the building.		

21 Trade and other payables

	2021 \$'000	2020 \$'000
Amount due to Mount Alvernia Hospital	69	70
Patients' deposits	1	25
Trade and other payables	529	507
Advance received from Lien Foundation	132	152
Accrued operating expenses	5,032	4,239
GST payable	113	104
Management fee payable	–	15
	5,876	5,112

The outstanding balance to Mount Alvernia Hospital is unsecured, interest-free and repayable on demand.

Advance received from Lien Foundation will be used for future Lien Foundation approved projects. During the year, the Company received the approval from Lien Foundation to transfer \$20,000 (2020: \$Nil) to Gym Tonic Fund (refer to note 14).

NOTES TO THE FINANCIAL STATEMENTS (CONT'D)

22 Donation from Mount Alvernia Hospital

Donation from Mount Alvernia Hospital of \$588,000 (2020: \$588,000) represents amounts waived by Mount Alvernia Hospital in respect of support costs charged to the Company.

In addition, included in the fundraising activities is an amount of \$30,000 (2020: \$Nil) donated by Mount Alvernia Hospital during a Charity Dinner.

23 Investment income and investment expense

	2021 \$'000	2020 \$'000
Interest income from time deposits	142	400
Interest income from investments		
- General Fund	366	659
- Endowment Fund	570	177
	936	836
Gain on disposal of investments		
- General Fund	803	2,468
- Endowment Fund	1,720	–
	2,523	2,468
	3,601	3,704
Investment income		
Investment expense		
- General Fund	(72)	(186)
- Endowment Fund	(153)	–
	(225)	(186)
Investment expense		
Net investment income	3,376	3,518

Investment expense relates to management fees paid to the fund managers and portfolio fees and accounting fees paid to the custodian bank.

NOTES TO THE FINANCIAL STATEMENTS (CONT'D)

24 Charitable activities

Expenditure on charitable activities under Accumulated Fund comprises the following:

	Programme expenses \$'000	Salaries and related costs \$'000	Contributions to defined contribution plan \$'000	Total \$'000
2021				
Hospice services	6,006	8,586	745	15,337
Day care services	1,892	1,365	192	3,449
Home care services	1,346	3,630	453	5,429
Total	9,244	13,581	1,390	24,215
Less: Funded by CST Operating Expense Matching Grant	–	(5,000)	–	(5,000)
	9,244	8,581	1,390	19,215
2020				
Hospice services	5,122	6,894	757	12,773
Day care services	1,637	1,049	170	2,856
Home care services	715	2,982	442	4,139
Total	7,474	10,925	1,369	19,768
Less: Funded by CST Operating Expense Matching Grant	–	(4,563)	–	(4,563)
	7,474	6,362	1,369	15,205
25 Professional fees				
External audit fees			28	26
Internal audit fees			7	26
Others			22	–
			57	52

NOTES TO THE FINANCIAL STATEMENTS (CONT'D)

26 Net income for the year

The following items have been included in arriving at net income for the year:

	Note	2021 \$'000	2020 \$'000
Supplies and consumables		1,100	1,162
Depreciation of property, plant and equipment	4	3,416	3,388
Repairs and maintenance		487	422
Mount Alvernia Hospital's support costs	(a)	450	497
Agency manpower services		2,803	2,310
Utilities		326	325
Staff costs		16,519	15,475
Contributions to defined contribution plans		1,711	1,552

(a) Mount Alvernia Hospital charges the Company for services rendered by Mount Alvernia Hospital to the Company.

27 Income taxes

The Company is an approved charity organisation under the Charities Act, Chapter 37 and an institution of a public character under the Income Tax Act, Chapter 134. No provision for taxation has been made in the financial statements as the Company is a registered charity with income tax exemption.

28 Tax deductible donations

Tax deductible donations amounting to \$6,703,991 (2020: \$6,431,476) were received during the year.

The Company enjoys a concessionary tax treatment whereby qualifying donors are granted 250% tax deduction for the donations made to the Company.

29 Commitments

As at 31 December 2021, the Company had commitments of \$802,744 (2020: \$Nil) relating to the purchase of computer and other equipment.

NOTES TO THE FINANCIAL STATEMENTS (CONT'D)

30 Related parties

Key management personnel compensation

Key management personnel of the Company are those having authority and responsibility for planning, directing and controlling the activities of the Company. The Board of Directors and executive management team are considered key management personnel of the Company.

Key management personnel compensation comprised:

	2021 \$'000	2020 \$'000
Short-term employee benefits	2,396	2,431

In compliance with the Code of Corporate Governance for Charities and Institutions of a Public Character, the annual remuneration of the Company's three highest paid staff fall into the following band(s):

	2021	2020
\$200,000 to \$300,000	1	1
\$300,000 to \$400,000	2	2

The directors did not receive any compensation for their services rendered to the Company. There are no paid staff who are close members of the family of the Chief Executive Officer or any Board members. Other than disclosed elsewhere in the financial statements, the transactions with related parties are as follows:

	2021 \$'000	2020 \$'000
Purchase of food and provision, medical supplies and clinical consumables from Mount Alvernia Hospital	37	32

NOTES TO THE FINANCIAL STATEMENTS (CONT'D)

NOTES TO THE FINANCIAL STATEMENTS (CONT'D)

31 Appendix A Funds

<----- Unrestricted Funds ----->							<----- Restricted Funds ----->												
Note	Accumulated Fund \$'000	Staff Welfare Fund \$'000	Salaries Adjustment Fund \$'000	Building Fund \$'000	Sinking Fund \$'000	Total Unrestricted Funds \$'000	Community Silver Trust Fund \$'000	Medical Equipment Fund \$'000	Paediatric Palliative Care Programme \$'000	Patient Assistance Fund \$'000	Project Next Door Fund \$'000	Respectance Fund \$'000	Singapore Ireland Fund \$'000	Gym Tonic Fund \$'000	President's Challenge Fund \$'000	Ingot IP Fund \$'000	Total Restricted Funds \$'000	Endowment Fund \$'000	Total Funds \$'000
As at 1 January 2020	50,637	735	1,810	50,066	16,500	119,748	13,993	52	632	188	870	38	34	19	–	8	15,834	20,000	155,582
Income																			
Income from generated fund																			
Voluntary income																			
- Donation - General	6,820	–	–	–	–	6,820	–	–	–	–	–	–	–	–	165	–	165	–	6,985
- Donation in kind	8	–	–	–	–	8	–	–	–	–	–	–	–	–	–	–	–	–	8
- Donation - Mount Alvernia Hospital	588	–	–	–	–	588	–	–	–	–	–	–	–	–	–	–	–	–	588
- Grant/Sponsorship received/receivable	3,686	158	725	–	–	4,569	12,700	–	–	–	103	–	–	–	–	–	12,803	–	17,372
	11,102	158	725	–	–	11,985	12,700	–	–	–	103	–	–	–	165	–	12,968	–	24,953
Fundraising activities	5,429	4	–	–	–	5,433	–	–	–	–	–	–	–	–	–	–	–	–	5,433
Investment income	3,527	–	–	–	–	3,527	–	–	–	–	–	–	–	–	–	–	–	177	3,704
	20,058	162	725	–	–	20,945	12,700	–	–	–	103	–	–	–	165	–	12,968	177	34,090
Income from charitable activities																			
- Government grants	10,318	–	–	–	–	10,318	–	–	–	–	–	–	–	–	–	–	–	–	10,318
- Patient fees	6,277	–	–	–	–	6,277	–	–	–	–	–	–	–	–	–	–	–	–	6,277
	16,595	–	–	–	–	16,595	–	–	–	–	–	–	–	–	–	–	–	–	16,595
Total income	36,653	162	725	–	–	37,540	12,700	–	–	–	103	–	–	–	165	–	12,968	177	50,685

NOTES TO THE FINANCIAL STATEMENTS (CONT'D)

NOTES TO THE FINANCIAL STATEMENTS (CONT'D)

<----- Unrestricted Funds ----->							<----- Restricted Funds ----->													
Note	Accumulated Fund \$'000	Staff Welfare Fund \$'000	Salaries Adjustment Fund \$'000	Building Fund \$'000	Sinking Fund \$'000	Total Unrestricted Funds \$'000	Community Silver Trust Fund \$'000	Medical Equipment Fund \$'000		Paediatric Palliative Care Programme \$'000	Patient Assistance Fund \$'000	Project Next Door Fund \$'000	Respectance Fund \$'000	Singapore Ireland Fund \$'000	Gym Tonic Fund \$'000	President's Challenge Fund \$'000	Ingot IP Fund \$'000	Total Restricted Funds \$'000	Endowment Fund \$'000	Total Funds \$'000
Expenditure																				
Cost of generating funds																				
- Fundraising expenses	223	-	-	-	-	223	-	-		-	-	-	-	-	-	-	-	-	-	223
- Investment expense	186	-	-	-	-	186	-	-		-	-	-	-	-	-	-	-	-	-	186
	409	-	-	-	-	409	-	-		-	-	-	-	-	-	-	-	-	-	409
Charitable activities																				
- Salaries and related costs	6,362	-	2,380	-	-	8,742	6,584	-		-	-	-	-	-	-	149	-	6,733	-	15,475
- Contributions to defined contribution plan	1,369	-	-	-	-	1,369	167	-		-	-	-	-	-	-	16	-	183	-	1,552
- Programme expenses	7,474	-	155	2,808	93	10,530	1,370	5		24	58	-	21	-	10	-	-	1,488	-	12,018
	15,205	-	2,535	2,808	93	20,641	8,121	5		24	58	-	21	-	10	165	-	8,404	-	29,045
Governance costs																				
- Professional fees	52	-	-	-	-	52	-	-		-	-	-	-	-	-	-	-	-	-	52
- Insurance	51	-	-	-	-	51	-	-		-	-	-	-	-	-	-	-	-	-	51
- Others	6	-	-	-	-	6	-	-		-	-	-	-	-	-	-	-	-	-	6
	109	-	-	-	-	109	-	-		-	-	-	-	-	-	-	-	-	-	109
Total expenditure	15,723	-	2,535	2,808	93	21,159	8,121	5		24	58	-	21	-	10	165	-	8,404	-	29,563
Net income/(expenditure) before tax expense	20,930	162	(1,810)	(2,808)	(93)	16,381	4,579	(5)		(24)	(58)	103	(21)	-	(10)	-	-	4,564	177	21,122
Income tax expense	-	-	-	-	-	-	-	-		-	-	-	-	-	-	-	-	-	-	-
Net income/(expenditure) for the year	20,930	162	(1,810)	(2,808)	(93)	16,381	4,579	(5)		(24)	(58)	103	(21)	-	(10)	-	-	4,564	177	21,122
Transfers																				
Transfer between funds																				
• Restricted to unrestricted funds	151	-	-	-	-	151	(104)	(47)		-	-	-	-	-	-	-	-	(151)	-	-
• Unrestricted to endowment funds	(15,000)	-	-	-	-	(15,000)	-	-		-	-	-	-	-	-	-	-	-	15,000	-
Fund close out	973	-	-	-	-	973	-	-		-	-	(973)	-	-	-	-	-	(973)	-	-
	(13,876)	-	-	-	-	(13,876)	(104)	(47)		-	-	(973)	-	-	-	-	-	(1,124)	15,000	-
Net Movement in funds	7,054	162	(1,810)	(2,808)	(93)	2,505	4,475	(52)		(24)	(58)	(870)	(21)	-	(10)	-	-	3,440	15,177	21,122
As at 31 December 2020	57,691	897	-	47,258	16,407	122,253	18,468	-		608	130	-	17	34	9	-	8	19,274	35,177	176,704

NOTES TO THE FINANCIAL STATEMENTS (CONT'D)

NOTES TO THE FINANCIAL STATEMENTS (CONT'D)

<----- Unrestricted Funds ----->							<----- Restricted Funds ----->										
Note	Accumulated Fund \$'000	Staff Welfare Fund \$'000	Salaries Adjustment Fund \$'000	Building Fund \$'000	Sinking Fund \$'000	Total Unrestricted Funds \$'000	Community Silver Trust Fund \$'000	Paediatric Palliative Care Programme \$'000	Patient Assistance Fund \$'000	Respectance Fund \$'000	Singapore Ireland Fund \$'000	Gym Tonic Fund \$'000	President's Challenge Fund \$'000	Ingot IP Fund \$'000	Total Restricted Funds \$'000	Endowment Fund \$'000	Total Funds \$'000
As at 1 January 2021	57,691	897	–	47,258	16,407	122,253	18,468	608	130	17	34	9	–	8	19,274	35,177	176,704
Income																	
Income from generated fund																	
Voluntary income																	
22	- Donation - General	6,009	–	–	–	–	6,009	–	–	–	–	–	56	–	56	–	6,065
	- Donation in kind	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
	- Donation - Mount Alvernia Hospital	588	–	–	–	–	588	–	–	–	–	–	–	–	–	–	588
	- Grant/Sponsorship received/receivable	2,705	147	–	–	–	2,852	5,588	–	–	–	20	–	–	5,608	–	8,460
23		9,302	147	–	–	–	9,449	5,588	–	–	–	20	56	–	5,664	–	15,113
	Fundraising activities	6,429	9	–	–	–	6,438	–	66	–	36	–	–	–	102	–	6,540
	Investment income	1,311	–	–	–	–	1,311	–	–	–	–	–	–	–	–	2,290	3,601
		17,042	156				17,198	5,588	66	–	36	20	56	–	5,766	2,290	25,254
Income from charitable activities																	
	- Government grants	10,005	–	–	–	–	10,005	–	–	–	–	–	–	–	–	–	10,005
	- Patient fees	7,262	–	–	–	–	7,262	–	–	–	–	–	–	–	–	–	7,262
		17,267	–	–	–	–	17,267	–	–	–	–	–	–	–	–	–	17,267
Total income		34,309	156	–	–	–	34,465	5,588	66	–	36	20	56	–	5,766	2,290	42,521

NOTES TO THE FINANCIAL STATEMENTS (CONT'D)

NOTES TO THE FINANCIAL STATEMENTS (CONT'D)

<----- Unrestricted Funds ----->							<----- Restricted Funds ----->										
Note	Accumulated Fund \$'000	Staff Welfare Fund \$'000	Salaries Adjustment Fund \$'000	Building Fund \$'000	Sinking Fund \$'000	Total Unrestricted Funds \$'000	Community Silver Trust Fund \$'000	Paediatric Palliative Care Programme \$'000	Patient Assistance Fund \$'000	Respectance Fund \$'000	Singapore Ireland Fund \$'000	Gym Tonic Fund \$'000	President's Challenge Fund \$'000	Ingot IP Fund \$'000	Total Restricted Funds \$'000	Endowment Fund \$'000	Total Funds \$'000
Expenditure																	
Cost of generating funds																	
23	- Fundraising expenses	299	-	-	-	299	-	-	-	-	-	-	-	-	-	-	299
	- Investment expense	72	-	-	-	72	-	-	-	-	-	-	-	-	-	153	225
		371	-	-	-	371	-	-	-	-	-	-	-	-	-	153	524
Charitable activities																	
24	- Salaries and related costs	8,581	-	-	-	8,581	7,890	-	-	-	-	-	48	-	7,938	-	16,519
	- Contributions to defined contribution plan	1,390	-	-	-	1,390	313	-	-	-	-	-	8	-	321	-	1,711
	- Programme expenses	9,244	83	-	2,808	138	776	-	89	20	-	10	-	-	895	-	13,168
		19,215	83	-	2,808	138	8,979	-	89	20	-	10	56	-	9,154	-	31,398
Governance costs																	
25	- Professional fees	57	-	-	-	57	-	-	-	-	-	-	-	-	-	-	57
	- Insurance	55	-	-	-	55	-	-	-	-	-	-	-	-	-	-	55
	- Others	5	-	-	-	5	-	-	-	-	-	-	-	-	-	-	5
		117	-	-	-	117	-	-	-	-	-	-	-	-	-	-	117
Total expenditure																	
		19,703	83	-	2,808	138	8,979	-	89	20	-	10	56	-	9,154	153	32,039
Net income/(expenditure) before tax expense																	
27		14,606	73	-	(2,808)	(138)	(3,391)	66	(89)	16	-	10	-	-	(3,388)	2,137	10,482
	Income tax expense	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
26	Net income/(expenditure) for the year	14,606	73	-	(2,808)	(138)	(3,391)	66	(89)	16	-	10	-	-	(3,388)	2,137	10,482
Transfers																	
Transfer between funds																	
9/12/ 15/20 17	• Restricted to unrestricted funds	301	-	-	-	(17)	(296)	-	-	20	-	-	-	(8)	(284)	-	-
	• Unrestricted to endowment funds	(25,000)	-	-	-	-	-	-	-	-	-	-	-	-	-	25,000	-
		(24,699)	-	-	-	(17)	(296)	-	-	20	-	-	-	(8)	(284)	25,000	-
	Net Movement in funds	(10,093)	73	-	(2,808)	(155)	(3,687)	66	(89)	36	-	10	-	(8)	(3,672)	27,137	10,482
As at 31 December 2021																	
		47,598	970	-	44,450	16,252	14,781	674	41	53	34	19	-	-	15,602	62,314	187,186

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