



2023 ANNUAL REPORT www.gracelodge.org.sg

WE CARE & SERVE, BEYOND DIFFERENTIATION









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ANNUAL R E P O R T



1 Annual Report – for Financial Year ended 31 March 2023

1.1 ORGANISATION PROFILE

1.1.1 About Us

GRACE LODGE was registered as a society on 19 December 1988 and under the Charities Act on 6 March 1990.

Charity Registration Number		0720
Unique Entity Number	:	UEN S88SS0120C
IPC Status	:	IPC 000336 01 September 2021 – 31 August 2024
Registered Address	:	105 Punggol Road, Singapore 546636
Place of Operation	:	19 Compassvale Walk, Singapore 544644
Banker	:	United Overseas Bank Limited, Siglap Branch
		Standard Chartered Bank(s) Ltd
Auditor	:	Robert Yam & Co PAC
Honorary Legal Advisors	:	Mr Khor Thiam Beng, Mr Khor Wee Siong
Honorary Medical Advisor	:	Dr. Ee Chye Hua

1.1.2 The Executive Committee

		Annual G	term from 1 October eneral Meeting held	on 24 September	2022.		-
Description	1	mbers ae not rem 2	unerated for their se 3	4	d, as their appoint 5	6	7
Name	Venerable Kuan Yan, BBM	Mdm Tan Suat Lay	Mr Yeo Yam How	Mr Wee Cho Tat	Mr Toh Seng Poh	Ms Lim May Poh, Mabel	Mdm Lim Watt
Position Held	President	Committee Member	Honorary Secretary	Assistant Treasurer	Honorary Treasurer	Assistant Secretary	Committee Member
Year of Appointment	Co-Founder, succeeded Founder, Late Venerable Yen Pei as President since 1997	Pioneer Board Member since establishment	Board Member since 2014	Board Member since 2013	Pioneer Board Member since establishment	Board Member since 2018	Board Member since 2006
Occupation	Buddhist Leader, Voluntary Social Worker	Executive Director Self-Employed	Retired Formerly Executive Director of Metro Pte Ltd	Assistant Director Employed	Retired Formerly Director of ERA Realty	Lawyer Employed	Finance Executive Employed
Position in GL's Affiliated Charities	President SBWS FHBCC	Committee Member – SBWS	Not Applicable	Not Applicable	Honorary Secretary - FHBCC	Assistant Secretary - FHBCC	Not Applicable
Board Meetings Attended from Apr 2022 to Mar 2023	3/3	3/3	3/3	3/3	3/3	3/3	3/3
			ore Buddhist Welfare Buddhist Cultural Ce		•		



1.1.3 Executive Sub-Committees

No.	EXECUTIVE SUB-COMMITTEES	COMMITTEE MEMBERS
		Mr Yeo Yam How, Chairman
1	Audit Committee	Mr Wee Cho Tat, Member
		Mdm Lim Watt, Member
		Mr Wee Cho Tat, Chairman
2	Programmes & Services Committee	Mr Toh Seng Poh, Member
		Ms Mabel Lim May Poh, Member
		Mdm Ng Bee Nah, Chairperson
3	Human Resource Committee	Venerable Kuan Yan, Member
		Mdm Saw Swee Lan, Member

1.1.4 Key Management Personnel

No.		Date Joined	
1	Mr Ranjit Singh	Director of Nursing	August 2010
2	Ms Lucy Lim	Director of Human Resources	February 2023
3	Mr Qian Zhi Jiang	Senior Operations cum Facilities Manager	March 2019

Entity	UEN No.
ngapore Buddhist Welfare Services	S81SS0060H
	Level 10 Hearty Ward 元化疗养室 Level 9 Joy Ward 次乐疗养室
范恩林 GRACE LODGE	Level 8 Radiance Ward 光环疗养室
	Level 7 Rainbow Ward 彩虹疗非宝
	Level 6 Sunshine Ward 阳光疗非宝



1.1.6 Vision and Mission Statements

OUR VISION

To deliver quality care for the elderly

OUR MISSION

To preserve dignity and loveliness in aging



OUR OBJECTIVES

To provide shelter and care for needy, handicapped persons and the aged sick in Singapore, regardless of race, religion or gender.





1.2 CORPORATE GOVERNANCE - POLICIES

As an Institution of Public Character (IPC) and a registered charity, Grace Lodge is committed to the established standards of corporate governance in Singapore.

Grace Lodge believes that strong corporate governance is in its best interests and is committed towards maintaining the standards required.

Grace Lodge is guided by a set of corporate governance guidelines, based on best practices in the corporate and voluntary sectors.

1.2.1 Policies

CONFLICT OF INTEREST POLICY

Grace Lodge adopts a policy of declaration by Executive Committee members, staff and volunteers with personal interests that may affect the integrity, fairness and accountability of Grace Lodge.

The Conflict of Interest Policy includes standard operating procedures in handling disclosure of a conflict of interest and how to address a situation when conflict of interest arises. Staff are required to sign a declaration to acknowledge the Conflict of Interest Policy.

PERSONAL DATA PROTECTION POLICY

Grace Lodge is committed to act responsibly under the Personal Data Protection Act (PDPA) to protect the personal data of individuals under Grace Lodge's custody.

The purpose of the policy is to define and implement the procedures and guidelines on protection of personal data of individuals, in compliance with the PDPA regulations.

This policy governs the collection, use, disclosure and protection of personal data of individuals. It also allows individuals to exercise their rights to access, correct or withdraw their data.

HUMAN RESOURCE POLICY

Grace Lodge ensures fairness and consistency in its human resource practices, through compliance with legislation requirements and updates to its Human Resource Policy.

This policy provides clear and structured guidelines for its human resource practices.

VOLUNTEER MANAGEMENT POLICY

Grace Lodge has a Volunteer Management Policy to ensures volunteers are supported in discharging their roles safely; their development and well-being are taken care of; and their contributions are appreciated and recognised.



FINANCE AND FUNDING POLICY

The nursing home is funded by the Government and public donations. Grace Lodge also collects fees from paying cases. Such fees are based on the individual families' financial situations. All families are means-tested to determine their respective abilities to pay. The Ministry of Health provides subsidies based on the per capita incomes of the families, with subsidies ranging from 0% to 75% of the norm cost as specified by the Ministry.

As an IPC, the nursing home's policy is to preserve its integrity and transparency, promote public trust and confidence in the nursing home, comply with the code of governance guidelines, institute and observe measures to prevent actual, potential or perceived conflicts of interest that can affect the integrity, fairness and accountability of the nursing home, as well as ensure that its staff and volunteers all act in the best interests of the nursing home to achieve its vision as defined above.

The policy includes establishing standard procedures for handling the disclosure of any conflicts of interest that may arise and how to address them.

RESERVES POLICY

Our reserve position as at the financial year ended 31st March 2023:

	Current Year	Previous Year	% Increase/ (Decrease)
Unrestricted Funds (Reserves)			
- General Funds	\$7,902,724	\$7,990,203	(1%)
Restricted Funds			
- Medifund Account	\$544,249	\$148,503	266%
- CST Fund	\$140,493	\$236,708	(41%)
Total Funds ¹	\$8,587,466	\$8,375.414	3%
Ratio of Reserves ² to Annual Operating Expenditure ³	0.69	0.75	(8%)

The reserves that we have set aside provide financial stability and the means for development of our principal activity. The current level of reserves at \$7.9 million is adequate to fund 0.69 years of annual operating expenditure. However, the reserves include the fixed assets of \$778,327 which are required for the continued operations of our nursing home. Adjusting for such fixed assets and depreciation (non-cash outlay) at operating expenditure, on a cash basis, this figure would be reduced to 0.64 years. We intend to grow our reserves to ratio of 1.0. We intend to use the reserves for the nursing home's operations and welfare activities.

The Management Committee regularly reviews the amount of reserves that are required to ensure that they are adequate to fulfill our continuing obligations.

¹ Total funds include unrestricted, restricted, designated and endowment funds.

² Unrestricted Funds.

³ Charitable Activities, Operating and Administration Expenses.



1.2.2 Governance Evaluation Checklist

GOVERNANCE EVALUATION CHECKLIST (ADVANCTED TIER) Code Compliance for the period from 1 April 2022 to 31 March 2023

S/No.	Code Guideline	Code ID	Response	Explanation (if Code guideline is not complied with)
	BOARD GOVERNANCE	112		
1	Induction and orientation are provided to incoming governing board members upon joining the Board.	1.1.2	Complied	
	Are there governing board members holding staff ¹ appointments? (skip items 2 and 3 if "No")		No	
2	Staff does not chair the Board and does not comprise more than one third of the Board.	1.1.3	-	
3	There are written job descriptions for the staff's executive functions and operational duties, which are distinct from the staff's Board role.	1.1.5	-	
4	The Treasurer of the charity (or any person holding an equivalent position in the charity, e.g. Finance Committee Chairman or a governing board member responsible for overseeing the finances of the charity) can only serve a maximum of 4 consecutive years . If the charity has not appointed any governing board member to oversee its finances, it will be presumed that the Chairman oversees the finances of the charity.	1.1.7	Complied	
5	All governing board members must submit themselves for re- nomination and re-appointment, at least once every 3 years.	1.1.8	Complied	
6	The Board conducts self evaluation to assess its performance and effectiveness once during its term or every 3 years, whichever is shorter.	1.1.12	Complied	
	Is there any governing board member who has served for more than 10 consecutive years? (skip item 7 if "No")		Yes	
7	The charity discloses in its annual report the reasons for retaining the governing board member who has served for more than 10 consecutive years.	1.1.13	Complied	
8	There are documented terms of reference for the Board and each of its committees.	1.2.1	Complied	
	CONFLICT OF INTEREST			
9	There are documented procedures for governing board members and staff to declare actual or potential conflicts of interest to the Board at the earliest opportunity.	2.1	Complied	
10	Governing board members do not vote or participate in decision making on matters where they have a conflict of interest.	2.4	Complied	
	STRATEGIC PLANNING			
11	The Board periodically reviews and approves the strategic plan for the charity to ensure that the charity's activities are in line with the charity's objectives.	3.2.2	Complied	
12	There is a documented plan to develop the capacity and capability of the charity and the Board monitors the progress of the plan.	3.2.4		
	HUMAN RESOURCE AND VOLUNTEER ² MANAGEMENT			
13	The Board approves documented human resource policies for staff.	5.1	Complied	
14	There is a documented Code of Conduct for governing board members, staff and volunteers (where applicable) which is approved by the Board.	5.3	Complied	



GOVERNANCE EVALUATION CHECKLIST (ADVANCTED TIER) Code Compliance for the period from 1 April 2022 to 31 March 2023

S/No.	Code Guideline	Code ID	Response	Explanation (if Code guideline is not complied with)
15	There are processes for regular supervision, appraisal and professional development of staff.	5.5	Complied	
	Are there volunteers serving in the charity? (skip item 16 if "No")		Yes	
16	There are volunteer management policies in place for volunteers.	5.7	Complied	
	FINANCIAL MANAGEMENT AND INTERNAL CONTROLS	1		
17	There is a documented policy to seek the Board's approval for any loans, donations, grants or financial assistance provided by the charity which are not part of the charity's core charitable programmes.	6.1.1	Complied	
18	The Board ensures that internal controls for financial matters in	6.1.2	Complied	
19	key areas are in place with documented procedures .	6.1.3	Complied	
19	The Board ensures that reviews on the charity's internal controls, processes, key programmes and events are regularly conducted.	0.1.5	Compiled	
20	The Board ensures that there is a process to identify, and regularly monitor and review the charity's key risks.	6.1.4	Complied	
21	The Board approves an annual budget for the charity's plans and regularly monitors the charity's expenditure.	6.2.1	Complied	
	Does the charity invest its reserves (e.g. in fixed deposits)? (skip item 22 if "No")		No	
22	The charity has a documented investment policy approved by the Board.	6.4.3	-	
	FUNDRAISING PRACTICES			
	Did the charity receive cash donations (solicited or unsolicited) during the financial year? (skip item 23 if "No")		Yes	
23	All collections received (solicited or unsolicited) are properly accounted for and promptly deposited by the charity.	7.2.2	Complied	
	Did the charity receive donations in kind during the financial year? (skip item 24 if "No")		No	
24	All donations in kind received are properly recorded and accounted for by the charity.	7.2.3	-	
	DISCLOSURE AND TRANSPARENCY			
25	The charity discloses in its annual report — (a) the number of Board meetings in the financial year; and (b) the attendance of every governing board member at those meetings.	8.2	Complied	
	Are governing board members remunerated for their services to the Board? (skip items 26 and 27 if "No")		No	
26	No governing board member is involved in setting his own remuneration.	2.2		
27	The charity discloses the exact remuneration and benefits received by each governing board member in its annual report. <u>OR</u> The charity discloses that no governing board member is remunerated.	8.3		
	Does the charity employ paid staff? (skip items 28, 29 and 30 if "No")		Yes	
28	No staff is involved in setting his own remuneration.	2.2	Complied	



GOVERNANCE EVALUATION CHECKLIST (ADVANCTED TIER) Code Compliance for the period from 1 April 2022 to 31 March 2023

S/No.	Code Guideline	Code ID	Response	Explanation (if Code guideline is not complied with)
29	The charity discloses in its annual report — (a) the total annual remuneration for each of its 3 highest paid staff who each has received remuneration (including remuneration received from the charity's subsidiaries) exceeding \$100,000 during the financial year; and (b) whether any of the 3 highest paid staff also serves as a governing board member of the charity. The information relating to the remuneration of the staff must be presented in bands of \$100,000. <u>OR</u> The charity discloses that none of its paid staff receives more	8.4	Complied	
30	 than \$100,000 each in annual remuneration. The charity discloses the number of paid staff who satisfies all of the following criteria: (a) the staff is a close member of the family³ belonging to the Executive Head⁴ or a governing board member of the charity; (b) the staff has received remuneration exceeding \$50,000 during the financial year. The information relating to the remuneration of the staff must be presented in bands of \$100,000. OR The charity discloses that there is no paid staff, being a close member of the family³ belonging to the Executive Head⁴ or a governing board member of the family³ belonging to the Executive Head⁴ or a governing board member of the charity, who has received remuneration exceeding \$50,000 during the financial year. 	8.5	Complied	
	PUBLIC IMAGE			
31	The charity has a documented communication policy on the release of information about the charity and its activities across all media platforms.	9.2	Complied	



1.3 CORPORATE GOVERNANCE - STAFFING

Residents are treated with compassion and respect by our team, which comprises diverse medical, nursing and support professionals with different skillsets and experience.

DESCRIPTION	STAFF (TOTAL	
DESCRIPTION	LOCAL	FOREIGN	TOTAL
Care Staff			
Director of Nursing	1	-	1
Deputy Director of Nursing	1	-	1
Nurse Managers	1	1	2
Nurse Educator	1	-	1
Senior Staff Nurses / Staff Nurses	5	9	14
Senior Enrolled Nurses / Enrolled Nurses	8	5	13
Nursing Aides	-	39	39
Therapy Assistants	6	6	12
Healthcare Assistants	1	56	57
Total No. of Care Staff	24	116	140

Support Staff			
Director of Human Resource	1	-	1
Senior Operations cum Facilities Manager	1	-	1
Senior Facilities cum Operations Executive	1	-	1
Medical Social Workers	2	-	2
Finance Executives	3	-	3
HR Executive	1	-	1
Administrative Assistants	2	1	3
Driver	1	-	1
Total No. of Support Staff	12	1	13
TOTAL STAFFING	36	117	153

SPECIALIST SERVICES					
DESCRIPTION	SERVICE PROVIDER	FREQUENCY OF SERVICES			
Medical Consultant	1	Twice a month			
Geriatrician	1	Once a month			
Psycho-Geriatrician	1	Twice a month			
Medical Officer	1	Twice a week			
Speech Therapist	1	Twice a month			
Occupational Therapist	1	Thrice a week			
Physiotherapist	1	Thrice a week			
Dietician	1	Once every 2 months			
Pharmacist	1	Weekly			
Total No. of Specialists	9				



1.3.1 Staff Development

Training is a crucial investment in the continuous development of our healthcare professionals, enabling them to deliver high-quality care and excel in their respective roles. From April 2022 to March 2023, 21 training courses were conducted with 278 attendees. These educational opportunities provide up-to-date knowledge, enhance skills specific to each role, foster professionals growth, and help professionals adapt to changing responsibilities.

They also ensure compliance with regulations and ethical standards, improve patient safety and outcomes, and contribute to overall patient satisfaction. Some of these training courses were stipulated by the Ministry of Health, to ensure that healthcare professionals meet the necessary standards of competence and practice in their respective roles.

Training courses for our nurses included:

- 1) Updates from the Harvard Medical School Geriatric Review Course
- 2) Is Your Stress Bucket Full?
- 3) Communicating sensitively with dying patients and their family.
- 4) A qualitative study on nurse-facilitated geriatric teleconsultation in nursing
- 5) Re-Visioning Aged Care Straddling Science, Technology and Art
- 6) Spiritual Care
- 7) Training course: N95 Respirator Mask Fitting Workshop
- 8) BCLS AED and CPR AED Training



Doctors undergoing NUHS Family Medicine Residency Program on attachment to Grace Lodge in a photo here with Dr Marie and our nurses.

Dr Marie, who provides services at Grace Lodge, is also Visiting Consultant at the Department of Family Medicine, National University Hospital. A total of 25 doctors were on attachment on a rotational basis.



Training on the use of a hoist to lift and transfer patients





Training on Prevention of Elder Abuse



COVID-19 Briefing



EAGLEcare & ICoNS – What's next after the collaboration?





1.4 PROGRAMMES AND ACTIVITIES

1.4.1 Staff Strength

- 1) There were **153** staff members as at 31 March 2023.
- 2) Total staff costs and emoluments for FY 2022 was **\$\$6,055,353.**
- 3) Employees are recruited locally and from abroad. Foreign nursing staff underwent training, which ensures they are equipped with the skills needed to look after the residents.
- 4) The key management personnel are responsible for planning, directing and monitoring the activities of the nursing home.
- 5) Number of staff members in the respective remuneration bands:

Position	Remuneration Band	No. of Staff
Key Management	\$\$100,001 and below \$\$200,000	3
Care Staff & Support Staff	\$\$50,001 – \$\$100,000	17
	\$\$50,000 and below	133

- 6) None of the 3 highest paid staff serves as a governing board member of Grace Lodge.
- 7) There is no paid staff who is a close family member of the Executive Head or a Board Member and who receives more than \$50,000 during the year.



Multi-disciplinary Zoom Meeting with Consultant Geriatrician of Khoo Teck Puat Hospital





Psychogeriatrician from Changi General Hospital reviewed patients

Dietician interviewed a resident about his diet



1.4.2 Our Services

Grace Lodge has a team of dedicated professionals, nurses, allied health staff and support staff, who provide comprehensive services to our residents. Residents are also supported with access to quality facilities, as well as medical care around the clock.

- 1) Grace Lodge services include:
 - medical care,
 - occupational therapy,
 - physiotherapy,
 - speech therapy.
- 2) Specialist services under the Integrated Framework include:
 - geriatric care,
 - psycho-geriatric care,
 - speech therapy,
 - pharmaceutical services,
 - dietetic services,
 - podiatrist services.

Volunteers engaged by Grace Lodge commit their time and efforts in improving the social and physical well-being of our residents.

- 3) Scope of volunteer work:
 - perform simple chores at the nursing home;
 - organise activities and celebrations;
 - provide hair-cutting services;
 - arrange outings for residents and accompany them during outings.



1.4.3 Admission to the Nursing Home

Applications for admission of subsidised residents are made by referrals through the Agency for Integrated Care (AIC), followed by review and approval by Grace Lodge Management, after careful consideration of the clinical conditions of the applicants.

Grace Lodge follows the admission criteria set by the Ministry of Health and AIC.

Admission Criteria:

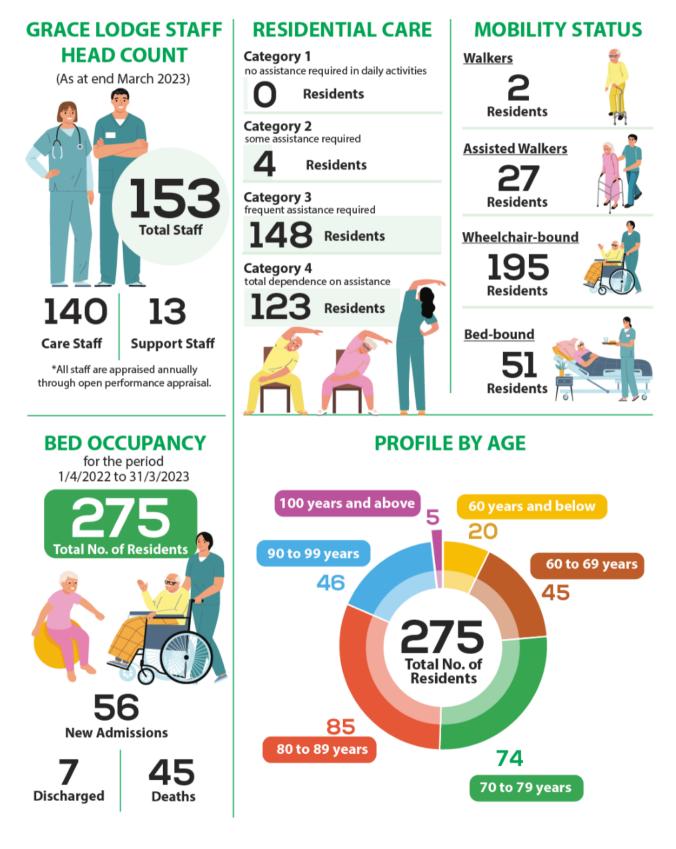
- 1) an elderly, sick person with (a) medical condition(s) such as stroke, diabetes mellitus and/or other chronic sickness(es);
- 2) a patient requiring long-term daily nursing care, such as tube feeding, pain relief, wound dressing;
- 3) a patient with no caregiver or the caregiver is unable to provide the nursing care required;
- 4) a patient with any of the following medical conditions: dementia, psychiatric illness (stable), MRSA infection (colonised);
- 5) a patient with special nursing needs, such as:
 - urinary catheter care;
 - colostomy care;
 - nasogastric / gastrostomy feeding;
 - insulin injections.

Pre-admission counselling is conducted by a multidisciplinary team with the family of the elderly prior to admission.

Our policies and procedures are made clear. The family is assured of quality care for the elderly in Grace Lodge and encouraged to provide feedback to the Management if they find any gaps in the provision of care.



1.4.4 Occupancy





DEMENTIA WARD (FEMALE)

The Dementia Ward located on Level 6 is geared towards serving the needs of residents with dementia. Through constant training and practice, our specially selected staff have come to understand and excel in caring for residents with dementia.

- 1) Maximum capacity of 30 beds, with 15 single bedrooms for individuals and 15 beds in an open-concept, general ward layout.
- 2) Criteria for admission:
 - female;
 - mild to moderate dementia;
 - continent;
 - ambulant.
- 3) Number of residents as at 31 March 2023: 29 females.



GENERAL NURSING HOME WARDS (FEMALE AND MALE)

- 1) Grace Lodge is a dedicated care facility serving a diverse community. With a total resident population of 275 as of 31 March 2023, we strive to provide the highest level of care and support to all residents.
- 2) In September 2022, we reached our highest resident count of 277 residents, reflecting the growing trust and confidence that families and individuals have placed in our facility.
- 3) We understand the importance of catering to individuals from various socioeconomic backgrounds. We are committed to ensuring that our services are affordable by all, including those from low-income families. A significant portion of our residents receive subsidies, which alleviate financial burdens and enable them to access the care they need.
- 4) Wards 6,7, and 8 are dedicated to providing care for female residents. These wards are designed with their unique requirements in mind, ensuring a safe and nurturing space where residents can receive personalised care. Similarly, Wards 9 and 10 are designated for male residents.



1.4.5 Programmes and Services Serving of Meals



Care Staff feeding the residents





Group Therapy

Medication Round





Mobile Vaccination Teams

Mobile Vaccination Teams came to vaccinate our residents for protection against COVID-19 virus.





1.4.6 Celebrations and Special Activities

<u>Highlights</u>

- 1) Visits by PCF Sparkletots with activities, games, singing and dancing;
- 2) Nurses' Day Celebration;
- 3) Celebration of Myanmar New Year for our staff from Myanmar;
- 4) Nursing Home Online Challenge;
- 5) National Day celebration;
- 6) When Music Meets Life: live performance of old songs via 3 Zoom Sessions;
- 7) National Celebration of Seniors (NCOS): an event held in conjunction with the International Day of Older Persons, to encourage seniors to pursue an active and meaningful lifestyle.

2022 Nurses' Day Celebration



At our vibrant nursing home, we create an atmosphere filled with joy, laughter and unforgettable moments for our cherished residents, through an array of engaging activities and events, such as lively games that foster camaraderie and captivating performances that transport everyone to a world of theatrical delight.





2023 Chinese New Year Celebration

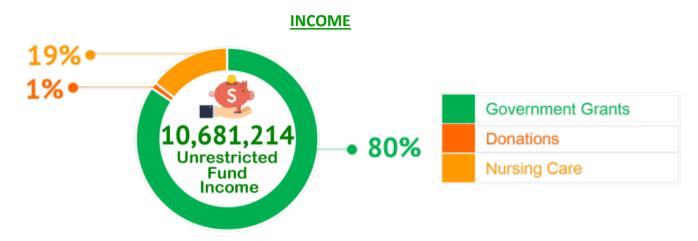
A kind donor sponsored lunch for residents at Green Delights vegetarian café.



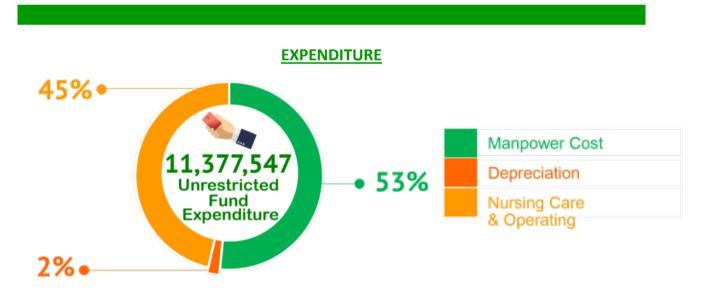


1.5 HIGHLIGHTS OF THE YEAR

1.5.1 Summary of Financial Performance (1 April 2022 – 31 March 2023)



Grace Lodge donation budgeted at \$120K, considering the market situation and inflation pressure on donors. There is no specific fund-raising plan.



Grace Lodge budgeted to incur \$6,538,889 (Governance Costs), \$4.331.949 (Expenditure for Charitable Activities) and \$1,190,088 (Administrative and Overhead Costs).



1.6 MOVING FORWARD

1.6.1 In the Year Ahead 2023 – 2024

1) Dementia Ward

- Dementia Ward has reached full occupancy;
- quality programs are being provided for our dementia residents.

2) Enhancing collaboration with Sengkang General Hospital (SKH)

- Advance Care Planning (ACP) Training for end-of-life care;
- increase tele-consultation with SKH to reduce referrals to Emergency department or hospitalisation;
- continue the services of Senior Medical Consultant from SKH.

3) Improving Manpower Quantity and Quality (on-going)

- hiring of more locals;
- training of staff to enhance their knowledge and skills;
- rotation of staff in different wards for operational adaptability;
- retention of staff through more incentives such as promotion, upgrading and monetary awards;
- improve teamwork and staff morale.

4) Prevention and Control of COVID-19 Infection

- infection-control training for care staff to ensure that all are well-trained in infection-control and use of Personal Protective Equipment (PPE);
- mandatory mask-wearing in our healthcare setting;
- safe zoning and distancing;
- personal and environmental hygiene, especially in "high-touch" areas;
- ensure adequate stockpile of PPE;
- immediate action on changing advisories from Ministry of Health (MOH);
- vaccination and testing for staff and residents;
- visitor control and screening to facilitate contact tracing when necessary;
- on-site ART (Antigen Rapid Test) tests for visitors as and when necessary.





1.6.2 Our Efforts to Combat COVID-19 in 2022-2023

With stabilisation of the local COVID-19 situation, Grace Lodge can operate in a smoother and more efficient manner, to provide our residents with enhanced care and services. The relief in the COVID-19 situation enables us to strengthen our preventive measures against future outbreaks, through robust infection control protocols, regular sanitisation of facilities and regular vaccination to maintain the overall health and well-being of both patients and staff.

Measures taken to combat COVID-19:

- regular briefings on the latest updates from the Ministry of Health and Agency of Integrated Care.
- careful monitoring of residents' and staff health status, with attention to flu-like symptoms;
- temperature-screening twice a day;
- contact tracing/ declaration;
- suspension of hair-cutting, birthday celebrations, volunteer activities;
- strict enforcement of the wearing of masks and Personal Protective Equipment;
- constant verbal and visual reminders (e.g. posters) for staff and visitors to observe social distancing and hygiene;
- enhancement of environmental hygiene through higher frequency of disinfection in "high-touch" and "high-movement" areas;
- stockpiling of essential medical supplies;
- increased training in pandemic-related topics via video conferencing;
- staff restricted from entering other wards, with each ward conducting its own ward training;
- deliveries on designated days and at designated locations;
- restrictions on visits by number, date, time, duration and movement within our premises;
- implementation of "Work-from-Home" arrangements.

All staff and residents have been vaccinated for protection against COVID-19.

Current Vaccination Status:

Vaccination Group	1 st Dose	2 nd Dose	3 rd Dose Booster
Staff	153	151	145
Residents	270	269	157

We continue to do our best to ensure that our residents and staff remain well and free from infection.

