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About Agency for Integrated Care (AIC)

The Agency for Integrated Care (AIC) is set up by the Ministry of Health (MOH) to oversee, coordinate and facilitate all efforts in care integration. Our mission is to achieve best health outcomes for our patients by empowering clients and enabling access to appropriate care, enabling stakeholders to strengthen the primary care, intermediate and long-term care and community mental health sectors, and enhancing collaboration to create a well-connected healthcare system. For more information, please visit www.aic.sg.

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In this issue, we look at the range of intermediate and long-term care (ILTC) facilities in the community and how they help the elderly to live out their golden years among their loved ones. For many elderly, staying in familiar surroundings near their friends and family underpins their ability to enjoy a good quality of life. With the recent “Not-in-My-Backyard” syndrome, we hope to dispel some of the most prevalent myths surrounding these facilities.

In preparing this issue, we had the opportunity to meet many inspiring individuals – patients and their caregivers who exemplify the phrase ‘ageing with grace’. I am especially moved by the positivity of Mr Agustin Tan (page 11), who, despite his terminal illness, loves cracking jokes and often at his own expense! I am also humbled by the determination of Mr Hassan, whose journey of care is captured in ‘Step by Step’ (page 9). With the help of therapy sessions, which he faithfully attends four times a week, and through his own grit, this chatty 74-year-old learned to walk again. If you or your loved one is in need of long-term care, I hope these stories will convince you that ageing in the community is viable and beneficial.

The healthcare sector also celebrated Nurses’ Day in August. In this issue, we speak to two award-winning nurses to find out what drives and inspires them to care for the elderly every day. I hope their stories will inspire more to enter this noble profession. On behalf of the NEXTSTEP team and AIC, I would like to thank all nurses in the ILTC sector for the joy, hope and comfort you bring to the elderly.

ANDY SEET
Chief Editor
Earlier this year, the Ministry of Health (MOH) announced a new subsidy framework to make long-term care services more affordable and accessible. Learn how the changes can benefit you and your elderly loved one.

**What is a means-test?**
The means-test is a method to calculate the subsidies you will receive from the government when you use long-term care services. Means-test ensures that patients from lower-income households receive more subsidies than those from higher-income households. From July 2012, Household Means-Testing is used for government-funded intermediate and long-term care (ILTC) facilities, such as community hospitals, nursing homes and day rehabilitation centres.

**How is per capita household monthly income calculated?**

\[
\text{Total household income divided by the total number of members in the household.}
\]

\[
\frac{\$3000/\text{mth}}{4 \text{ persons}} = \$750
\]

**How do I apply?**
Medical social workers or administrative staff of the restructured hospitals or ILTC service providers can help you with your application for government subsidies. Log onto www.silverpages.sg to find out more about paying for your long-term care.

**More affordable aged care services**

Bills for long-term care services can be significant as patients may require treatment over longer periods of time. The enhanced subsidy framework helps more Singaporeans pay for these services.
Eating chapati again with a smile

Retired school attendant Madam Letchimi is happy to have her set of dentures.

"I have been losing my teeth one by one, and now I have only one tooth left," says the 64-year-old widow who lives in a rental flat with her aged mother, Madam Mariyaa.

Madam Letchimi’s dietary options are further limited by her diabetes. But things are set to change, thanks to Project :D (pronounced “Project Smile”), a community outreach project to help low-income residents receive subsidies for dental treatments at neighbourhood clinics. The initiative taps on subsidies provided by the Community Health Assist Scheme (CHAS), which the government enhanced in January this year to help more Singaporeans better manage their chronic conditions with greater affordability and convenience.

Madam Letchimi first heard of CHAS when volunteers from the Tanjong Pagar-Tiong Bahru Citizens’ Constituency Committee came knocking at her door.

The volunteers have identified 50 residents in the rental blocks of 110 and 117 Jalan Bukit Merah to benefit from the pilot project. One of the earliest beneficiaries of Project :D, Madam Letchimi and her mother have already received their dentures, which were partly paid for using CHAS subsidies.

“It’s been a long time since I’ve had chapati. I’m so happy to be able to eat it again!” says Madam Letchimi.

To qualify for CHAS, you must:
• be a Singapore Citizen aged 40 and above OR disabled
• have a per capita household monthly income of $1,500 and below OR live in a residence with an Annual Value of not more than $13,000 if your household has no income

Call 1800-275-2427 (1800-ASK-CHAS) or visit www.chas.sg to find out more and to download an application form. Forms are also available at any public hospital, polyclinic or community centre.
As the population in Singapore grows, the number of people with schizophrenia is expected to increase by two per cent as will the number of people suffering from dementia, which will go up significantly with the rapidly ageing population.

Since the implementation of the National Mental Health Blueprint in 2007, the government has invested some $180 million to strengthen the core services. These include early detection and intervention for children with mental health issues and the provision of home-based mental health services for the frail elderly.

More will be done to develop community-based mental health services so that patients can seek treatment in clinics near their homes instead of having to see the psychiatrist in the hospital. To do this, general practitioners will play a larger role in treating patients with mild to moderate mental conditions such as anxiety and depression. There are plans for Day Care Centres and other services to help families care for their loved ones with dementia. The government will spend over $100 million to support such community mental health projects over the next five years.

Apart from the provision of more community-based mental health services, the government will also beef up some of the other hospital and institution-based services for those with more severe mental disorders. According to the Ministry of Health (MOH), the capacity of specialised outpatient
memory clinics in the hospitals will be expanded by about 60 per cent to serve the increasing number of dementia patients. Plans are underway to build two new psychiatric nursing homes, one additional psychiatric rehabilitation home and two more psychiatric sheltered homes at a cost of about $70 million.

And to make mental health services more affordable, in addition to subsidised treatment at polyclinics, those who qualify for the Community Health Assist Scheme (CHAS) can also receive subsidised treatment at private GP clinics for treatment of mental disorders like schizophrenia and major depression. Medisave can also be used for outpatient treatment of these conditions.

With all these expanded facilities and services, MOH's intake for the training of psychiatrists will be increased from five to 15 per year over the next five years. Similarly, the intake for the training of clinical psychologists will be increased by more than 20 per cent, and more allied mental health professionals including nurses will be sent for advanced training in mental health related disciplines to support our national mental health plans.

Bringing community mental health care closer to you
To help elderly patients with dementia receive the right care and support in the community, two voluntary welfare organisations Thye Hua Kwan Moral Charities and O'Joy Care Services have teamed up with Khoo Teck Puat Hospital, AIC and philanthropic organisation, Temasek Cares, to offer their services to residents living in the north of Singapore.

Madam Umi Kelesom, 64, is grateful for the help she receives from O'Joy Care Services. Since February, counsellors from the centre have visited her several times to provide advice and tips on caring for her demented father, Mr Ahmad Salleh, 91. "I feel more confident about taking care of my father. The counsellors also give me advice on taking care of myself so that I don't get burnt out," says Madam Umi, a widow. She is the sole caregiver of her father.

CREST Team
The Community Resources and Support Engagement Team, or CREST, helps identify seniors at risk of developing dementia and refers them to the right care services. Counsellors also follow up on patients who are discharged from hospitals to assist them in reintegrating into their community. The team is currently based at Thye Hua Kwan Moral Charities.

Contact: THK CREST
Chong Pang Social Service Hub
Block 126, #01-431 Yishun Ring Road
Tel: 6100 1201
Email: crest@thkmc.org

COMIT Team
The Community Intervention Teams, or COMIT, provides holistic services to improve the quality of life for elderly with dementia and depression. Through home visits and individualised intervention plans, counsellors monitor the condition of the elderly and refer them to appropriate services. Families and caregivers can tap on the information, tools and resources provided by COMIT to better care for their loved ones. The team is currently based at O'Joy Care Services.

Contact: O'Joy COMIT
Tel: 6749 0190
Email: comit@ojoy.org
Day Rehabilitation Centres (DRCs)
Day Rehabilitation Centres provide rehabilitation for frail seniors who require such follow-up care after their discharge from hospitals. These may be patients who are recovering from stroke, heart disease, fractures or other conditions which have affected their physical abilities. DRCs provide physiotherapy and occupational therapy to help them regain the ability to perform activities of daily living like bathing, dressing and eating.

Therapists at DRCs can also train caregivers to better equip them to care for their loved ones. Government subsidies are available for Singapore citizens or permanent residents who visit DRCs, with the level of subsidy depending on the family’s income.

Dementia Day Care Centres
Dementia day care centres offer structured day care programmes to train seniors with dementia to care for themselves. In addition to receiving training, caregivers can also seek information, support and respite care from these centres.

Day Care Centres
Day Care Centres provide supervision and support to seniors while their family members are at work. They also provide respite care to caregivers. The elderly can have their meals there and take part in social and recreational activities. The centres also cater to frail seniors who require follow-up with maintenance programmes after their discharge from day rehabilitation centres.

Senior Activity Centres (SACs)
Senior Activity Centres provide support to the elderly from low-income families especially those living in HDB rental flats. The seniors can drop by SACs to join...
IN YOUR SHOES

Reality check
Three myths about eldercare services in the community

1. Having an eldercare centre near me is inauspicious or unhealthy as those who visit it are dying or have illnesses that are contagious.
   **Reality:** Eldercare centres provide rehabilitation services to patients who require therapy such as physiotherapy and occupational therapy to help them regain their physical abilities so that they can take care of themselves. The centres also take care of the elderly while their families are at work. These clients are typically healthier and require a lower level of care. They do not suffer from infectious diseases that may spread to others.

2. Families will abandon their elderly at the eldercare centres.
   **Reality:** Eldercare centres cater to elderly who are able to move around in the community and have some family support at home. The elderly return home to their family at the end of the day and do not stay overnight at the centre.

3. Eldercare centres have off-putting odours and will disturb the peace of my neighbourhood.
   **Reality:** Eldercare facilities are properly maintained and managed by professional healthcare personnel who have been trained in hygiene matters. While seniors are encouraged to interact with one another and communicate with their therapist, the overall noise levels at these centres are usually low and should not cause any disturbance.

Use the Eldercare Locator tool on www.silverpages.sg to find an eldercare service that meets the needs of your loved one.

SPICE Centres
The Singapore Programme for Integrated Care for the Elderly (SPICE) is a care model that enables patients who would normally have been admitted to a nursing home to be cared for in the community. Patients visit the centres during the day to receive a suite of services covering medical, nursing, allied health and personal care before returning home in the evening to be with their families and caregivers. SPICE is currently being piloted at the Salvation Army Bedok Multi-Service Centre and the Tembusu Rehabilitation Centre.


in the recreational activities and meet other seniors.

These centres also offer support services such as monitoring of frail and/or homebound elderly, befriending and emergency alert response calls; on top of guidance, advice, information and referrals for other services. SACs are run mainly by voluntary welfare organisations with support from community partners such as grassroots organisations, Community Development Councils and other eldercare service providers.
beaming Mr Hassan bin Abdullah, 74, can now work out unaided on a stationary bicycle at the Asian Women's Welfare Association's (AWWA) READYCARE Centre in Ang Mo Kio. He is also able to walk short distances on his own.

This is a far cry from June 2010 when Mr Hassan was referred to AWWA’s day rehabilitation centre (DRC) after suffering a stroke which left him wheelchair-bound and unable to perform basic activities for himself such as taking a shower.

Regular therapy and workouts at the centre, which provides rehabilitation services to seniors with physical challenges as well as day-care services for the elderly, have improved his condition. He can now move around independently, though he still uses his wheelchair for longer distances, and may require some assistance in climbing stairs. Therapists at the centre expect him to continue to do better over time.
What is SMF?
Senior’s Mobility Fund (SMF) helps seniors with some disabilities to buy a mobility device at a subsidised rate, so that they can move around at home and in the community. A qualified therapist will help assess the seniors’ needs to ensure they are equipped with the right equipment. Transport subsidies are also available for seniors who qualify to enable them to visit a day rehabilitation centre (DRC) for therapy.

Who can apply for SMF?
To qualify for a mobility device, you must:
• be a Singapore Citizen aged 60 and above
• have a per capita household monthly income of $1,500 and below OR live in a residence with an Annual Value of not more than $13,000 if your household has no income

A qualified therapist will also assess you to determine the need and type of mobility device.

To qualify for transport subsidies:
You must be a Singapore Citizen aged 55 and above, and be receiving rehabilitative therapy at an MOH-accredited and funded DRC.

How do I apply for SMF?
To find out more about subsidies for mobility devices, call 6603 6800, email smf.mobility@aic.sg or visit www.aic.sg.

You can also approach the therapist at your MOH-accredited and funded DRC to apply for the transport subsidy on your behalf.

To calculate your per capita household monthly income, simply take the total income of all the family members living in your household and divide it by the total number of family members in your household.
Ms Pauline Tan, 46, has found it easier to care for her father at home since he was admitted to the Holistic Care for Medically Advanced Patients (HOME) programme in May last year. Her father, Mr Agustin Tan, 73, is suffering from chronic obstructive pulmonary disease, a progressive illness of the lungs that makes it hard to breathe.

Under the palliative home care programme administered by the Agency for Integrated Care (AIC), a team of nurses, a doctor and a counsellor has been visiting Mr Tan regularly. The services are provided free, with patients paying only for medication and other consumables.

Ms Tan, a clinic assistant, says: “When I’m at a loss about what to do, I can call up the nurses for their advice. Previously, when my father’s condition worsened, I’d panic. It has helped us avoid unnecessary trips to the hospital.”

Included under the HOME programme is Advance Care Planning (ACP), whereby the counsellor visiting the family has initiated discussions regarding Mr Tan’s future healthcare plans. The counsellor has provided information to help the family better understand Mr Tan’s illness and how it will progress. Through the ACP talks, Mr Tan has made it clear that he does not want any invasive medical interventions to save his life.

As her father has stated his wish for conservative treatment, Ms Tan says: “I feel I can answer to my siblings.”

Another tool to help plan for life’s unpredictability is...
the Lasting Power of Attorney (LPA). Financial services consultant Andy Cheah’s experience with his father prompted him to take the step last year to make an LPA. His younger brother and mother followed suit more recently. “After meeting with an accident in 2008, my dad was mentally unresponsive. We had to deal with all his affairs,” says Mr Cheah.

Mr Cheah had to apply to the court for legal authority to manage his father’s finances and well-being – a process which took him six long months and cost the family about $5,000.

In contrast, it is easy to apply to register for an LPA, Mr Cheah pointed out. It takes a few minutes to fill up the form and up to six weeks for the LPA to take effect. Registration costs between $50 and $200.

He says: “An LPA gives you peace of mind. You decide who to take care of your financial and other affairs rather than leave it to the court to decide for you. And it prevents disputes among family members.”

Planning ahead
Make your wishes known so that when you are too sick to make decisions for yourself, your family will know exactly what to do.

Advance Care Planning (ACP)
ACP is a series of conversations about your wishes for care and treatment should you become unable to speak for yourself. This enables your loved ones to know your treatment preferences during a medical crisis, thus easing the burden of decision-making for them.

Advance Medical Directive (AMD)
AMD is a legal document stating you do not want to receive extraordinary life-sustaining treatment to prolong your life if you become terminally ill and unconscious, and where death is imminent.

Lasting Power of Attorney (LPA)
LPA is a legal document where you appoint someone you trust to make decisions on financial and personal welfare matters on your behalf should you lose your mental capacity in the future.

For more information on:
ACP: www.silverpages.sg/ACP
AMD: www.moh.gov.sg/AMD
LPA: www.publicguardian.gov.sg

Mr Andy Cheah
Much has changed in healthcare in terms of medical advancements and technology since the days of Florence Nightingale. What hasn’t changed is the human touch which heals the spirit often broken by illness, pain and suffering.

For Madam Low Mui Lang, 53, who is executive director of The Salvation Army Peacehaven Nursing Home, her passion for her job is evident. She says: “It is my calling to help those in need.”

She rose through the ranks, starting off as an assistant nurse in 1977 to being head of a nursing home. In 2010, Madam Low received the President’s Award for Nurses, which recognises three nurses every year for their commitment, professionalism and dedication to excellent nursing care.

Prior to joining the nursing home in 2001, Madam Low worked in a hospital. She says: “In the hospital, patients get well and go home after a few days. Here in the nursing home, they stay for a longer period of time. I call them my ‘residents,’ and we provide much more than just custodial care. You get to know the

Congratulations to our ILTC nurses for receiving the 2012 Nurses Merit Award!

Our nurses have made exceptional contributions to the Intermediate and Long-Term Care (ILTC) sector. We salute them for their dedication to the profession.

Ms Quah Kim Moi
Nursing Officer, Ang Mo Kio-Thye Hua Kwan Hospital

Ms Phua Joo Keow
Senior Staff Nurse, Dover Park Hospice

Mr Joselito Samonte Iporac
Nurse Manager, Lions Home for the Elders (Toa Payoh)

Ms Wenifreda Ricalde Macatangay
Senior Staff Nurse, Peacehaven Nursing Home

Madam Mak Ngai Khan
Director of Nursing, Ren Ci Hospital

Ms Goh Soo Lan
Senior Enrolled Nurse, St Andrew’s Community Hospital

Ms Tan Soo Keng
Senior Staff Nurse, St Luke’s Hospital
residents beyond their ailments. You come to know and understand their feelings and their fears. Without them saying a word, we can tell whether they are happy or sad.”

“The care that we provide here tends to be much more intimate. For this reason, I find it immensely satisfying working in a nursing home.”

Madam Low and her multidisciplinary team comprising a resident doctor, nurses, social worker and the pastoral team work closely together to keep the residents as well as possible despite their ailing health. The nurses are trained to look out for any signs of deterioration in the health of the residents and take appropriate action immediately. If not, given their already frail condition, any deterioration will make their medical condition more complex.

Madam Low is also an advocate of the rehabilitative model of care and has a team of therapists on hand at the nursing home to help residents learn the use of their limbs again. In 2010, she worked with the Agency for Integrated Care (AIC) to develop the Singapore Programme for Integrated Care for the Elderly (SPICE), an innovative care model adapted from the US-based Programme for All-Inclusive Care of the Elderly (PACE). The programme provides an alternative solution for frail elderly who might need to be admitted into a nursing home, enabling them to receive care in the community instead, with the support of patient-centric services covering medical, nursing, allied health and personal care. SPICE was piloted at the Salvation Army Bedok Multi-Service Centre, a day rehabilitation centre which Madam Low also oversees, and has since been replicated in another centre in the West.

For Madam Low, one of her challenges working in the nursing home is thinking up activities for her 400 residents with ages ranging from 40 to over 100 years old, and with different physical and mental abilities. Residents are kept busy with arts and craft projects, rehabilitative therapy, and even shopping trips to the supermarket.

“Whatever their medical or mental condition, we recognise that there is still value in life for them. Although they are living here in a nursing home, we want to enthuse them and make their lives as joyful and as dignified as possible. We want to give them quality of life,” says Madam Low.

And her wish for them is that “when the time comes, they will die well – that they will walk until they pass on in life.”

Sharing Madam Low’s passion for nursing is Ms Goh Soh Lan, 64, who works in St Andrew’s Community Hospital as a senior enrolled nurse. She is one of the winners of this year’s Ministry of Health’s Nurses Merit Award.

Ms Goh says: “I love my patients. You have to go under their skin and understand their situation. Only then can you empathise with them. And I always remember that I’ll be their age myself one day.”

Even though she is a junior nurse, Ms Goh takes pride in what she is doing. It does not bother her that her supervisors at work are much younger than her. “If you are willing to learn, people will teach you,” says Ms Goh who feels blessed that she is learning all the time from the people she works with and the courses that she gets to attend.
Meals for an elderly who has difficulty in swallowing (a medical condition known as Dysphagia) need not be bland and boring. This recipe shows how soft or pureed food can still be interesting and tasty!

**Ingredients**

- 120g fish fillet
- 80g carrots, peeled and diced
- 40g baby spinach
- 100g laksa noodles
- 5g ginger, peeled and crushed
- 1 small onion, diced and divided equally into 2 portions
- 1 tsp sesame oil
- Pepper to taste
- 1 tsp canola oil
- 750ml vegetable stock

**Method of Preparation**

1. Crush the ginger and boil it in 20ml of water till ginger softens and turns dark yellow.

2. Marinate the fish slices with sesame oil, ginger water (above) and 2 pinches of pepper. Set aside.

3. Rinse the spinach and laksa noodles separately.
4 Pan-fry both portions of the onions with 1/4 teaspoon of canola oil in separate saucepans until they become fragrant.

5 Add about 375ml vegetable stock in each saucepan. Add carrots into one of the saucepans and bring broth to a boil.

6 Add the marinated fish to the saucepan with the carrots. In the other saucepan, add the laksa noodles and spinach together.

7 Remove from heat once the carrots and fish turn soft. Separate the carrots and fish from the soup and place the soup in a bowl. Set the carrots and fish aside for blending.

8 Boil the laksa noodles and spinach till they are cooked. Pour this soup into the fish and carrot soup mentioned earlier. Set the laksa noodles and spinach aside for blending.

9 Place the carrots and fish in a blender. Blend until texture is smooth. Add soup to the mixture gradually for easier blending.

10 Pour out the carrot mixture and set aside.

11 Repeat Step 9 and 10 with the noodles and spinach.

12 Place the pureed mixtures separately on the same plate.

13 Serve warm.

Dysphagia

Dysphagia is the medical term for difficulty with swallowing. Some people with dysphagia have problems swallowing certain foods or liquids, while others cannot swallow at all.

Dysphagia can affect a person’s quality of life because it may prevent them from enjoying meals and social occasions.

Depending on the cause of dysphagia, there are several treatments, including:
• Speech and language therapy to learn new swallowing techniques
• Changing the consistency of food and drinks to make them safer to swallow
• Alternative forms of feeding, such as tube feeding through the nose or stomach, if swallowing is unsafe

Caution: If the person you are looking after faces difficulty in swallowing, please check with your healthcare provider on the types of food suitable for him.
**Q:** My mother who is in her 80s has advanced cancer. She is staying home with us at the moment, and visits the hospital frequently. She has told us that when the time comes, she wishes to spend her last days at home instead of in a hospital or hospice. We are unsure if we can do this because none of us in the family has any nursing or medical training – what if she needs to be tube fed or be on a drip? We know she is really suffering from the pain as well. Would staying at home make it worse?

**ANSWER...**

It is never easy to decide on end-of-life matters. However, if the doctor has assessed that your mother no longer benefits from curative treatments at a hospital and she has voiced her choice to remain with her family at home, then home hospice care may be the right care option for her. Home hospice care is for patients who are home bound and require care and support in coping with end-of-life stages. Typically, a nurse will visit the patient at home for about one to two hours each time to provide nursing care. The number of visits is dependent on the patient’s condition.

Rest assured that your mother is in safe hands as home hospice nurses will also provide assistance in pain management. Additionally, the nurse assigned to your mother will develop a care plan to ensure she spends her days with dignity while enjoying a high quality of life. Should your mother’s condition deteriorate, the nurse may then call the doctor in to assess her health and take appropriate action therein. Family members and caregivers will also be taught about the disease process, medications, symptom management and providing basic physical care.

Talk to your doctor at the hospital to find out more about home hospice care or to get a referral for the service. Home hospice care can be paid for using ElderShield or Medifund if your family qualifies. Please visit www.silverpages.sg for more information about home hospice care.

**Q:** I am keen to sign up for the Community Health Assist Scheme (CHAS) but was told I would need to make copies of the NRICs and Birth Certificates of all my family members. I am also supposed to get each member to sign the application form. Why do I need to do this?

**ANSWER...**

CHAS was enhanced to allow more middle to lower income Singaporeans to receive subsidies when they visit a family doctor or dentist that participates in the Scheme. One of the eligibility requirements is for applicants to have a per capita household monthly income of $1,500 and below, or live in a residence with an Annual Value of not more than $13,000 if their household has no income.

The per capita household monthly income is derived by dividing the total household income by the total number of family members in the household. Applicants are asked to submit photocopies of the NRICs/Birth Certificates of the family members in their household for verification. By providing the signatures of the family members living at the same address as you, the Central Provident Fund (CPF) and the Internal Revenue Authority of Singapore (IRAS) can assess if your household meets the income criteria for CHAS. This is aimed at making the application process more convenient as you do not need to submit any other supporting income documents.

Visit www.chas.sg for more information about CHAS.
Subsidies for medical and dental care at a CHAS clinic near you!

It’s convenient!

Sign up for CHAS today!

Pick up an application form at any Community Centre, Public Hospital or Polyclinic.

With the Community Health Assist Scheme (CHAS), you can receive subsidies when you visit a participating medical or dental clinic near you.

To qualify for CHAS, you must:

- Be a Singapore Citizen
- Be 40 years old and above OR disabled* AND
- have a per capita household monthly income of $1,500 and below OR live in a residence with an Annual Value (AV) of not more than $13,000 if your household has no income*

* Unable to do one of the six activities: washing/bathing, toileting, transferring, feeding, dressing and/or mobility.

* Per capita household monthly income refers to the total household income divided by the total number of members in the household. For example: A family of four staying together with a combined monthly income of $3,000 has a per capita household monthly income of $750 ($3,000 ÷ 4 = $750). AV is the estimated annual rent of your property if it were to be rented out.

For more information, call
1800-275-2427 (1800-ASK-CHAS)
www.chas.sg
3 SIMPLE STEPS
To find the best-suited intermediate and long-term care for you

1 ASSESS
WHAT IS BEST-SUITED FOR YOUR NEEDS

2 LOCATE
A SERVICE PROVIDER NEAR YOU

3 PAYING
FOR YOUR INTERMEDIATE AND LONG-TERM CARE

For more information visit www.aic.sg