

WOODBIDGE HOSPITAL ENDOWMENT FUND
Annual Report for Year Ended 31 December 2009

The Woodbridge Hospital Endowment Fund was set up on 25 September 2000 under the Health Endowment Fund scheme. It was registered under the Charities Act on 28 February 2001.

IPC Registration Number	:	HEF0065/G
UEN Number	:	T01CC1489K
ROS Registration Number	:	52929304L
Registered Address	:	10 Buangkok View, Singapore 539747
Board of Trustees	:	Dr Tan Chue Tin, Consultant Psychiatrist Dr Tan Chue Tin Clinic Pte Ltd (Acting Chairman of the Board of Trustees)
		Dr Philbert Chin President Retired and Senior Volunteer Program (RSVP)
		Ms Tina Hung, Deputy CEO National Council of Social Service
		Ms Jacqueline Khoo, Company Director People's Dialysis Centre
		Ms Irene Png, Chief Financial Officer Alexandra Health Pte Ltd (Treasurer)
		Mr Lee Chow Soon, Senior Partner Tan Lee & Partners
		Mr Leong Yew Meng, Chief Executive Officer Institute of Mental Health/Woodbridge Hospital
		A/Prof Rathi Mahendran Chairman Medical Board Institute of Mental Health/Woodbridge Hospital
		A/Prof Wong Kim Eng, Clinical Director National Addictions Management Service Institute of Mental Health/Woodbridge Hospital
		Dr Tan Weng Mooi, Chief Operating Officer Institute of Mental Health/Woodbridge Hospital

Banker : DBS
Auditor : KPMG

OBJECTIVES

The Fund is established to receive contribution and donations for the promotion, development and provision of mental health-related services in Singapore, including:

- the pursuit of medical research and development
- programmes for continued medical, nursing, paramedical and related education and training
- publication of research and educational literature
- provision and improvement of equipment and facilities for research and development
- holding of conferences, seminars, and exhibitions
- provision of funded care to patients who are in need of financial assistance

POLICIES

Governance

A Board of Trustees was set up in June 2005 to oversee the running and management of the Fund to ensure that funds are allocated judiciously, following Ministry of Health guidelines. Board members are renewed or re-appointed every two years.

Finance and Funding

The Woodbridge Hospital Endowment Fund is managed by staff from the Institute of Mental Health (IMH). Staff salaries and other administrative overheads of managing the Fund are borne by IMH. Funds are generally raised through fundraising activities and direct appeal for donations to corporations and foundations.

REVIEW OF YEAR 2009

Programmes Supported

In 2009 the Woodbridge Hospital Endowment Fund supported various programmes to benefit IMH patients and their caregivers. Some of these programmes are:

1. KIDZ Power - Nurturing Kids @ IMH

KIDZ Power reaches out to children of persons with mental illness. It is a preventive and remedial avenue for children who have parents with mental illness or addiction-related problems. It focuses on (i) preventive education and information (ii) development of self-care and coping skills (iii) healthy emotional expression and (iv) improving communication and fostering better parent-child relationship.

Four camps have been conducted and some 48 families (parents & children) have benefited from this programme.. In addition, more than 150 families have been further

identified as being able to benefit from this programme and will invited to take part in future camps.

Covenant Family Service Centre has been engaged to collaborate with IMH on this programme since June 2009, to expand our outreach to more families. The family therapists of the centre will also follow up on cases identified to have ongoing issues following the camp.

2. Vocational Training-Transitional Employment & Supported Employment

This programme equips patients with vocational skills that will assist them to secure employment and facilitate community re-integration. Patients who are motivated for open employment but who are unable to sustain their jobs in the community are selected to join IMH's vocational training program. Several projects are set up to simulate the job environment and requirements in different sectors. Patients can be trained during this Transitional Employment period in food and beverage service and kitchen skills (offered by Secret Recipe), retail (offered by Salvation Army), car wash and cleaning (offered by ISS) and clerical skills. Patients may also be sent for relevant courses before being job placed in the open employment market.

The Job Club at IMH provides patients with Supported Employment, by helping them with placements, and subsequently support to assist them to adapt to their new work environment and to increase job retention.

In 2009, a total of 56 patients were enrolled into this programme. Thirty-four completed training (60.7%), 30 achieved job placements (88.2%), 17 sustained job placements for 2 months (56.7%) or more. The WBI (Work Behaviour Inventory) improvement scores for Jan to Aug 2009 was 85.7%, meeting the targets set,

3. Patient Welfare (Nursing)

The Patient Welfare programme was developed to meet the social, educational and recreational needs of IMH long stay patients and patients who have been discharged and placed under the Community Mental Health Program. These patients are from the low-income group and have poor social support. Many live in isolation and have no social life.

IMH nurses, together with volunteers, regularly organise various activities and outings to improve the patients' well-being and to help them keep in touch with what is happening around them. For patients who have been discharged, these activities form part of their psychosocial rehabilitation so that they are well-integrated into the community and are able to remain as long as possible in their own homes.

Although activities and outings were minimised during the H1N1 months from April to Sept 2009, more than 2,200 patients benefitted from this programme in the year.

4. Patient Welfare (Medical Social Work)

IMH discharges about 900 patients a year following inpatient treatment. A group of these patients are from the low-income group and have poor social support. Following their discharge, most have to return regularly for continual outpatient treatment and

medication. Those requiring more intensive follow up are referred for rehabilitative programmes such as Day Centres or home-based services.

To help them keep up with their treatment/rehabilitation, IMH provides assistance to these outpatients in the following areas: (i) transportation (bus or taxi fares) (ii) financial assistance for non treatment-related needs like food, consumables, spectacles, walking aids, dentures (iii) lunch allowance for food (for Day Centres attendees).

One hundred and forty patients have been assisted in this programme in 2009.

5. Very Special Outstanding Performance (VSOP) – Choir Programme

This programme was initiated to enable persons with psychiatric illnesses to benefit from the therapeutic effects of singing and performing. The secondary objective was to train them to a professional standard for performances, to help de-stigmatise mental illness. In 2009, 26 patients were trained under the VSOP programme, with 6 internal and external performances held. A survey, done through a *client satisfaction* questionnaire, showed that the clients were satisfied with the programme, with an average score of 27 out of 30.

6. Financial Assistance for COPES Patients

The COPES programme offers a comprehensive, multi-disciplinary assessment and intervention service for children requiring learning, social, emotional or behavioural support. A number of children who will benefit from being enrolled in COPES cannot afford to do so for financial reasons. These children do not meet the stringent criteria for full Medifund assistance or may receive only partial Medifund assistance. As patients typically require multiple sessions, the programme fees can be a burden to the family. The Financial Assistance programme helps to defray the costs for deserving patients. In 2009, 44 patients benefited from the financial assistance and were provided with intervention/assessments.

7. Early Psychosis Intervention Programme (EPIP) Club

The EPIP Club was started in 2005 and plays an integral part in the holistic treatment of patients on the Early Psychosis Intervention Programme. The Club conducts various activities, which include vocational and functional assessments, skills and training programmes, social activities, caregivers support, and public awareness events. The Club is run by EPIP occupational therapists, case managers and volunteers. In 2009 135 patients went on the programme.

8. Therapy Gardens

Three therapy gardens at IMH provide horticulture therapy for patients, which aids in their rehabilitation and treatment. The gardens serve patients from the acute, geriatric and long-stay wards. More than 80 patients were engaged in horticulture therapy in 2009, exceeding our goal of 50 per year.

9. Financial Assistance for Autism Patients

Financial assistance was provided to help needy patients who require treatment at the Autism Clinic@CGC. Besides managing mental health co-morbidities in the patients (eg. anxiety, depression, OCD etc) and improving their social skills, functional

communication and independence, the clinic helps to empower parents in the support of their autistic children. Fifteen patients benefited from financial assistance in 2009.

10. Home Improvement Programme

This programme helps enhance the living standards for needy patients who require help with housing arrangements upon their discharge from IMH. Many of these patients live alone and do not have social support. They need assistance, for example, for the purchase and transportation of basic furniture and necessities such as pillows and blankets, and the connection of public utilities. Twelve patients were assisted under this programme in 2009. A plan has also been put in place to engage contractors to eradicate bed bugs and replace furniture for 25 patients who are under the visitation roster of the Community Mental Health Team.

11. Stepping Stones Rehabilitation Programme

The Stepping Stones Rehabilitation Programme was started in October 2003 to provide rehabilitation to patients before discharge, to enable them to successfully reintegrate back to their families and the community. Skills taught include community living skills, psychosocial skills, and medication management. Funding for this programme has been used to purchase education materials for use by patients. In 2009, 162 patients benefitted from the programme.

12. Caregivers' Guide

The Caregivers' Guide aims to help caregivers better understand and manage the conditions of their loved ones with mental illness. The guide also gives them tips to look after their own physical and mental health. The guide is based on content developed by doctors, nurses, psychologists and medical social workers. Six thousand copies were published and distributed to caregivers through IMH, voluntary welfare organisations, doctors and medical social workers.

13. Child-Centered Play Therapy

This evidence-based programme targets children in child abuse, divorce, and family relationships cases, and those who have selective autism, trauma, stress, and anxiety issues. By focusing on the child and not the problem, the programme builds resilience, self-empowerment, sense of child's right to choose, make decisions and experiment, without being judged. The child experiences a sense of confidence in free choice, within the minimal limits set by the therapist. Thirty-four patients benefitted from the programme in 2009.

14. Community Arts Programme at the Community Wellness Centre

This programme provides a supportive environment for IMH patients to develop interests and discover their abilities. By focusing on artistic competencies instead of their disabilities, the programme improves our patients' self-esteem and facilitates the formation of a new identity (healing). Thirty-two patients were trained under this programme, with 86% of patients showing improvement on the Rosenberg self-esteem scale, which is a widely-used self-esteem measure in social science research.

FUND RAISING

The bulk of the \$20,500 funds raised in 2009 came direct from foundations, corporate donations and individuals. A total of \$335,000.00 came from President's Challenge, while the Lee Foundation donated \$480,000 to the WHEF for the development of a Nursing Education Centre. No fundraising event was organised in 2009.

REVIEW OF FINANCIAL STATE AND EXPLANATION OF MAJOR FINANCIAL TRANSACTIONS

The Fund recorded a surplus of about \$605,069 in the year 2009. This was primarily due to donations received from Lee Foundation and President's Challenge. Grants of about \$239,070 were made in 2009 to initiatives to support patients. We wish to thank all donors, friends and supporters who have made significant contribution to the Fund.

IPC FUND RAISING AND EXPENDITURE PLANS FOR THE FOLLOWING YEARS

Year 2010

The Fund will rely predominantly on donations from the public, corporations and foundations. It is envisaged that about \$250,000 will be raised through such channels in 2010. Fund raising events may be identified and initiated to supplement these sources of income if necessary. A sum of \$106,387 from the President's Challenge donation has been extended from 2009 for use till 31 December 2010.

The Fund would continue to be used for projects and programmes that provide rehabilitation, welfare, intervention programmes, research as well as subsidies for needy patients. For FY2010, a budget of about \$288,737 will be set aside for programmes as shown below:

<u>No.</u>	<u>Programme funded</u>	<u>Amount (\$\$)</u>
1	Vocational Training-Transitional Employment & Supported Employment (iLive)	\$45,850
2	Patient Welfare – Nursing	\$30,000
3	Patient Welfare – MSW	\$94,500
4	Very Special Outstanding Performance (VSOP) – Choir Programme	\$12,250
5	Early Psychosis Intervention Programme Club	\$16,169
6	Therapy Gardens	\$9,000
7	Stepping Stones Rehabilitation	\$1,500
8	Caregivers' Guide	\$9,000

9	NEAR Cognitive Remediation Programme	\$1,010
10	Comparative Study on the Efficacy of Lofexidine for Opioid Detoxification	\$ 20,480
11	Nurturing Kids @ IMH	\$48,978
Total funding for the period Jan 2010 to Dec 2010		\$288,737

Following years

The Fund will rely predominantly on donations from the public, corporations and foundations. Fund raising events may be identified and initiated to supplement these sources of income if necessary. These may include a charity golf and a charity carwash in 2011.

Projected Fundraising Target in 2011: \$250,000

Projected Fundraising Target in 2012: \$250,000

In keeping with good fundraising practices, fundraising costs for administrative expenses will be kept to a minimum at less than 3% a year.

It is envisaged that the Fund will continue to support patients under the following broad categories of programmes and initiatives:

- Patient Rehabilitation Programmes
- Patient Welfare Programmes
- Subsidies for Medical Services

The projected budgets pertaining to the support of programmes for patients in 2011 and 2012 are:-

Projected Budget in 2011: \$250,000

Projected Budget in 2012: \$250,000

STATEMENT OF ACCOUNTS

The statement of accounts for the financial year ended 31 December 2009 is attached.

