



Clients of OCTAVE@IMH keep themselves meaningfully occupied in various volunteering activities.

Volunteering as Rehabilitation

OcTAVE (Occupational Therapy: Activities, Vocation & Empowerment)@IMH is a psychosocial rehabilitation centre that offers a range of outpatient rehabilitation programmes. These programmes seek to promote community integration for persons with mental illness, by nurturing their potential and providing them with therapeutic support to facilitate their recovery.

Previously, the focus in OCTAVE@IMH was to help clients return to a worker role as part of their societal reintegration. However, there were some clients who did not see the need to return to a worker role, yet who needed to be productive and contribute to society. To address the needs of such clients, OCTAVE@IMH introduced volunteering opportunities in 2016.

The process of volunteering gives clients a sense of competence and accomplishment in a work-like environment. This helps them to be productive without the perceived stressfulness of paid work, and also enables them to explore

potential interests. Being engaged thus helps them stay well, even as they find meaning in volunteering as an occupation.

OcTAVE@IMH organises group volunteering activities on a quarterly basis with external organisations. To date, clients have helped with food distribution, gardening work, maintenance of facilities and equipment, goodie bag packing and event facilitation. Client Ms H shared, "Volunteering has helped broaden my perspectives, and given me more confidence." Peer Support Specialist, Harry commented, "As a client before and now as a staff, volunteering has impacted me with experiences that go beyond the feel-good glow of altruism. It has provided me with tangible benefits mentally and physically, and has definitely added fun and fulfillment to my life!"

If you are looking for volunteers to help out in your organisation or events, please contact Mr Jayson Sudhasan or Ms Bee See Roei from the IMH Occupational Therapy Department at

jayson_sudhasan@imh.com.sg; see_roe_i_bee@imh.com.sg or 6389-2677 for a discussion.

“ As a client before and now as a staff, volunteering has impacted me with experiences that go beyond the feel-good glow of altruism. It has provided me with tangible benefits mentally and physically, and has definitely added fun and fulfillment to my life! ”

Harry, Peer Support Specialist, IMH



Vijay engaged in his work as a PSS in IMH.

Peer Power

*Mr Vijay Pratap Rai,
Peer Support Specialist, IMH*

I was only in my early twenties when I first felt like I was under high-tech satellite surveillance by people I trusted, and that my thoughts were being broadcast to the whole world. I was then an entrepreneur, running an events company with a friend while waiting for my university results. I recall feeling that I was being monitored, and hearing voices. However, I remained able to function as I felt I would not be harmed.

It was a different story a few months later. I experienced electric-like bodily sensations, and some energy moving within me in a circular motion. I could not eat, could not sleep and had difficulty functioning. This led me to see a specialist for help. Even so, I managed to complete two events.

I was in shock when I was finally diagnosed with psychosis in 2010, and suffered from self-stigma. But I slowly recovered under the

care of mental healthcare professionals, as well as with support from family and friends. Taking my medications on time, applying the healthy coping strategies I learned, engaging in hobbies such as playing soccer and spirituality boosted my recovery.

Two years later in 2012, my case manager felt that I had some skills to contribute as a Peer Support Specialist (PSS), and could provide support to peers who also suffer from psychosis. Though I initially doubted my abilities, I started sharing my story using a pseudonym. When I saw that my sharing helped others, I gained confidence. I attended further training, and learned how to support peers through active listening,

asking open-ended questions and guiding them to their inner wisdom, etc.

By 2016, I was employed as a full-time PSS in IMH. My role involves supporting peers on an individual and group basis, training, mentoring peer apprentices, interacting in an interdisciplinary team, advocacy work and administrative duties.

I feel privileged in my journey as a PSS. Besides helping my peers with their recovery, the strategies I share with them are reinforced within me and this helps me in my own recovery too. When people in the community witness peers and I getting better, they will truly begin to believe that recovery is possible.

Multidisciplinary Approach to Stub Out Smoking

Every day, about 7 Singaporeans die prematurely from smoking-related diseases. Smoking is the largest cause of preventable death in the world, yet it takes time to quit smoking because the nicotine in cigarette smoke is addictive.

Since March 2017, the National Addictions Management Service (NAMS) introduced a smoking cessation service using a multidisciplinary approach to help patients overcome nicotine dependence. This approach combines both pharmacological treatment and counselling over several sessions as required, and is offered on an outpatient basis.

Upon arrival at the NAMS clinic, nurses and doctors will take a detailed assessment of the patient's background, current smoking patterns, potential triggers for smoking, severity of dependence, and also measure

his expired carbon monoxide levels. Based on this information, they will customise the treatment approach for him.

Besides NRT, the doctor may also suggest medications that can help in smoking cessation. Thereafter, a counsellor will help the patient with the behavioural change process, which is often the most difficult aspect of overcoming an addiction. This may involve learning to deal with triggers that reinforce the smoking habit e.g. stress or negative emotions. Because overcoming an addiction takes time, the

team will determine a suitable time frame to quit in consultation with the patient.



Patients may call the All Addictions Helpline at 6-RECOVER (6-7326837; operates 8am to 11pm daily) for an appointment. This service is available at the NAMS Clinic in IMH, and also at the Community Wellness Clinic (Queenstown Polyclinic). For more information on the charges, please refer to www.nams.sg.

Healthcare Humanity Awards 2018: Stories of Exceptional Dedication

At the 15th Healthcare Humanity Awards (HHA) on 26 April 2018, three IMH staff and a volunteer were lauded for displaying altruism above and beyond their call of duty. Seventy-three awardees from public healthcare institutions, intermediate and long-term care providers received the HHA in all.

Mr Yong Kwon Seng, a volunteer with IMH for the past seven years, was among the record number of 11 recipients of the highest accolade, "Honourable Mention". In spite of the demands of his work as a teacher and his postgraduate studies, Kwon Seng faithfully spends time with long-stay patients in IMH every weekend and even on public holidays, organising recreational activities and empowering them to be "Boss for the Day" with the opportunity to run a flea market stall. Aside from IMH, Kwon Seng volunteers with mentally disadvantaged patients in nursing homes and patients with leprosy.



Mr Yong Kwon Seng

Recognised for his unswerving commitment towards psychiatric patients sentenced to the Mandatory Treatment Order was Mr Roger Tan Boon Meng, Principal Medical Social Worker. Over his 13-year career at IMH, Roger has facilitated their transition back into society with great compassion, in spite of the heightened social stigma of their mental illness and past criminal offences. To provide opportunities for their caregivers to create positive memories with them, Roger has also initiated bi-annual festival celebrations in the long-stay remand wards.



Mr Roger Tan Boon Meng

her nursing career to date. While she is Chief Nurse now, she still makes time to work in the wards alongside the staff. This has helped her better understand ground issues, and implement solutions which have both improved patient care and work conditions. She was also instrumental in developing the slow-stream rehabilitation programme that helps long-stay patients to recover by becoming more independent.

Ms Samantha Ong has looked after patients with mental health conditions at IMH for all 31 years of



Ms Samantha Ong

Ms Gemma Angela Fernandez, Senior Case Manager supports patients with complex social needs after they are discharged, and ensures their reintegration into the community through an Aftercare Programme. She connects with her patients, collaborates closely with the community partners, and advocates strongly for her patients' needs with the relevant agencies. Outside of work hours, Gemma helps to refurbish her patients' homes and seeks sponsorship for furniture and electronic household items. She even delivers groceries to patients in need so that they can be well-settled into the community.



Ms Gemma Angela Fernandez

These winners' stories testify when one goes the extra mile, a little goes a long way and that indeed, a life touched is a life changed.

A New Hangout for Patients and Caregivers

IMH's Case Management Unit recently set up "The Hut" to better engage persons with mental health issues and their caregivers on an informal basis. Resembling a cosy living room, the daytime drop-in facility, run by IMH case managers with assistance from volunteers, offers a conducive space to socialise, share stories of recovery and participate in activities such as reading, watching TV, drawing, colouring and gardening. Snacks and drinks are provided. In fact, patients from the long-stay rehabilitation ward have recently been roped in to prepare and serve up hot desserts like green bean soup, red bean soup or barley. These treats are served every Thursday from 12.30pm to 1.30pm, or until the soup pot is empty.

"The Hut" is located near the entrance of IMH and is open from 10am to 3pm on Mondays to Fridays. Patients and caregivers are welcome to drop in when they visit IMH for their appointments, or any time at their convenience.



"The Hut" is a welcoming space for persons with mental health issues and their caregivers.

Financial Schemes and Assistance for Psychiatric Treatment



*Mr Daniel Hum,
Assistant Manager, Business Office, IMH*

What is the difference between Medisave, MediShield Life and Medifund (3Ms)?

Medisave is a personal healthcare savings account that can be used for inpatient and outpatient treatments. Patients may also use the Medisave accounts of their immediate family members for bill payment.

MediShield Life is a basic hospitalisation insurance plan which provides lifelong coverage for all Singapore Citizens and Permanent Residents who receive care under B2 and C wards.

Medifund is a government fund that helps needy Singapore Citizens who cannot afford to pay the outstanding amount of their healthcare bills, even after offsetting government subsidies, claims from Medisave, and MediShield Life.

How can I make use of the 3Ms for psychiatric treatment, and for what specific conditions?

If you choose to seek treatment at IMH or any of the restructured hospitals, you will be able to use Medisave to cover most of your outpatient charges if you are assessed to have any of the conditions under the Chronic Disease Management Programme (CDMP). These conditions include major depression, schizophrenia, bipolar disorder, anxiety and dementia.

If inpatient treatment is required, Medisave can also be used to settle the hospital bills. The withdrawal limit is S\$150 per day and a maximum of S\$5,000 per year. Singapore Citizens and Permanent Residents would also be covered under MediShield Life.

What aspects of treatment do the 3Ms not cover?

Medisave does not cover:

- Outpatient consultation fees, tests and investigations (except for conditions under CDMP)
- Charges for medical reports
- Private expenditures, such as telephone calls
- Ambulance fees
- Hospital stays for less than eight hours
- Respite care (when a full-time carer takes a break, and someone else or an institution does the caring for a short period of time)

MediShield Life does not cover treatment for drug addiction or alcoholism, social overstays (where the patient is fit for discharge but insists on staying on) and outpatient treatments.

Medifund does not cover:

- Respite care
- Social overstays
- Other services, such as ambulance fees, telephone calls, laundry, etc.
- Private class bills
- Medical reports

How do I apply to use the 3Ms for my psychiatric treatment? If I still have difficulty paying my bills, what should I do?

Medisave Utilisation

You will be required to complete a Medical Claim Authorisation Form which can be obtained from the hospital. This will serve as your authorisation for the hospital to submit the hospital bill to the Central Provident Fund (CPF) Board to draw down from your Medisave balance.

MediShield Life Claim Submission

You may inform the hospital staff of your intention to make a claim. The hospital will submit the MediShield Life claim on your behalf and any reimbursement will be made by the CPF Board to the hospital directly if there is a claim payout. The remaining amount can be paid for using Medisave or cash.

Medifund Application

If you require Medifund assistance, please approach the medical social workers in the hospital who will guide and assist you throughout the application process, including the verification of your financial status.

Please do not let financial concerns deter you from seeking help for mental health issues. If your family has difficulty settling the hospital bills, speak to the medical social workers in the clinic/healthcare institution. They will check your eligibility for various financial assistance schemes before making the appropriate financial aid recommendations to assist you as best as they can.

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