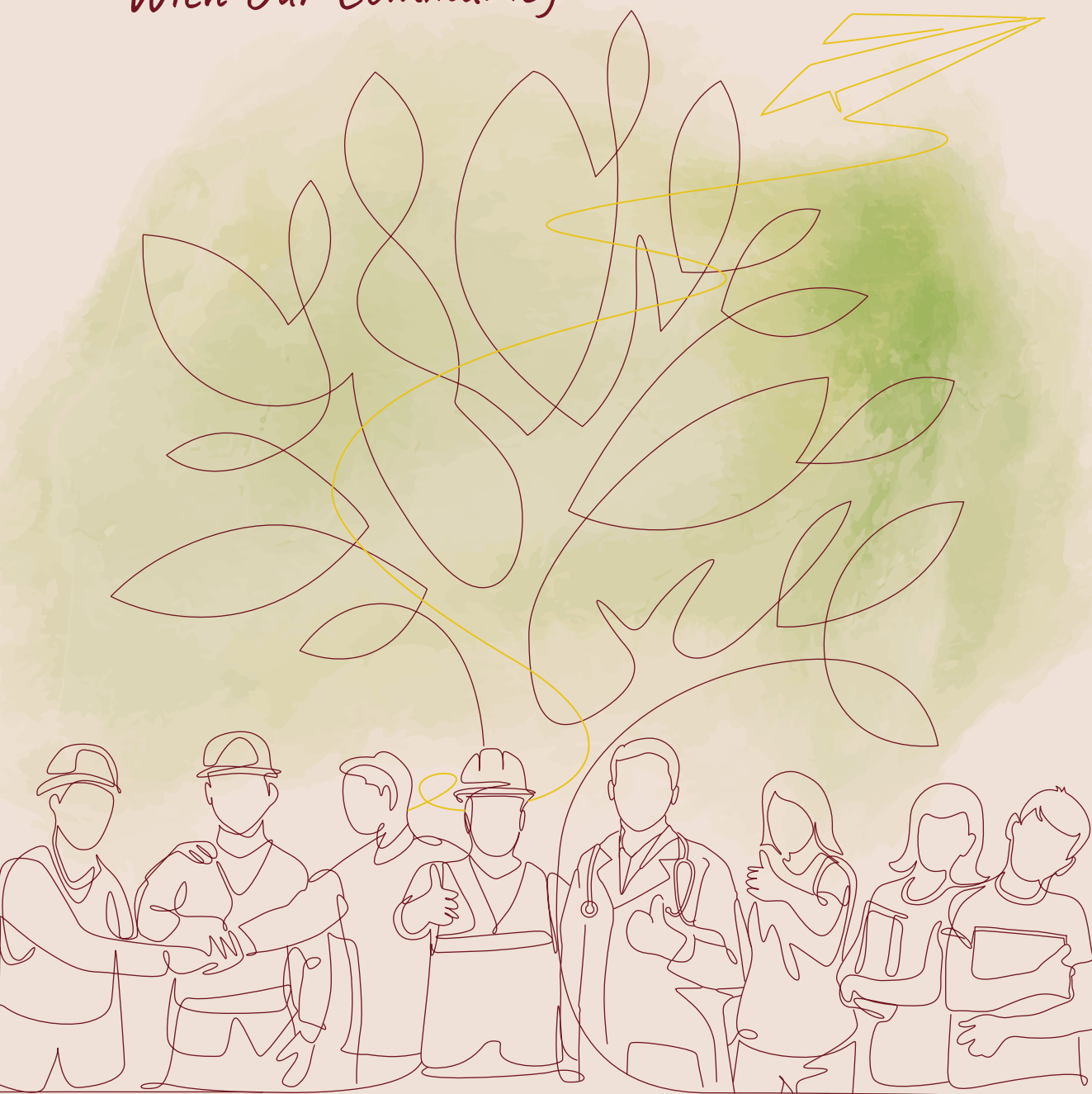


Growing With Our Community



Annual Report 2021



OUR VISION

*Every migrant worker lives a life of health,
wellbeing and dignity*

Contents



Word From Our Chairman

“ HealthServe will shift our focus to areas where needs remain. These are in the areas of dental and mental health, as well as workers with complex health issues or with work injuries requiring casework and rehabilitation services. ”

HealthServe celebrates our 15th anniversary this year. As we look back, we thank God for His providence, which has enabled HealthServe to grow from a small outfit of three staff and a handful of volunteers to a thriving community of thousands working together with 26 staff to support migrant workers in need.

The theme of our Annual Report this year is Growing With Our Community. We have been able to grow our work over the past 15 years because our community has grown. From a narrow base of supporters, our community now encompasses individuals, foundations, educational institutions, dormitory operators, employers, corporates, social service and government agencies. In 2021, we reached over 119,000 migrant workers through medical, dental and mental health services, casework and social assistance, as well as education, training and other outreach activities. We could not have done this without the support of all these partners.

A major development for HealthServe in 2021 is our launch of Singapore's first 24-hour crisis helpline for migrant workers, in response to heightened levels of mental stress among these workers. We are grateful to the Ministry of Manpower (MOM) and generous donors including Barclays, Chen Su Lan Trust, and Tong Eng Group for their funding support of our mental health work, the Samaritans of Singapore which helped to train our staff and volunteers and the 150 volunteers who signed up to be helpline responders.



Ms Chan Chia Lin

CHAIRMAN
HealthServe Ltd.

A landmark development in the migrant worker landscape has been the MOM's initiative this year to establish a primary healthcare plan for migrant workers incorporating employer subscription and a network of migrant worker medical centres across Singapore. This is a move HealthServe welcomes and one for which we have championed for years.

As primary medical care becomes affordable and widely accessible to migrant workers, HealthServe will shift our focus to areas where needs remain. These are in the areas of dental and mental health, as well as support for workers with complex health issues or with work injuries requiring casework and rehabilitation services. A dental consultation at a private or public clinic costs several times a worker's daily wage and the waitlist at our Geylang dental clinic is four months. Hence, scaling up our dental services is an important priority.

We are moving upstream to focus more on preventive care. We will increase efforts in the training and education of migrant workers in psychological first aid and mental wellbeing, chronic disease management and injury prevention. The aim is to empower them to take charge of their own health and wellbeing.

Another shift is to view migrant workers as our partners or co-workers, instead of viewing them simply as our clients or beneficiaries. In this regard, we introduced a Peer Support Leader training programme to train migrant workers whom we have trained in psychological first aid to step up to be co-facilitators. We will try to enlist more migrant workers to be volunteers in our clinics and at our outreach activities.

The Management and Staff of HealthServe have continued to work tirelessly this year against the backdrop of the ongoing pandemic. I am deeply grateful for their hard work and dedication. I am also grateful for the stellar support of my fellow Board members and would like to express particular appreciation to Chan Kum Kit and Matthew Saw, our two longest serving board directors who are retiring from the board at the end of 2021.

A special mention this year must go to Paperspace Asia. A design collective, it volunteered its services pro-bono to help design, project manage and fundraise for the renovation of our Geylang office. Contractors, office furniture and furnishing suppliers and others contributed in cash and in kind. Thanks to their combined efforts, we now have a well-planned and conducive office space for staff and multi-functional therapy and counselling rooms.

We are deeply grateful and truly humbled by your encouragement and shared belief in HealthServe's vision. We look forward to your continued support and collaboration as we journey towards a compassionate and inclusive society where every migrant worker lives a life of health, wellbeing and dignity.



Word From Our Executive Director

We ended 2021 with a lighter heart, as movement restrictions for our migrant worker community finally eased, albeit slowly, towards year-end.

For close to two years, more than 200,000 migrant workers living in dormitories in Singapore were largely confined to their rooms, only allowed to leave for work or visit designated recreation centres. Relative to the rest of the Singapore population, the prolonged movement restrictions for the marginalised community expectedly took a toll on workers' mental health. These were often on top of their existing challenges relating to health, family, finances, and employment.

In response, HealthServe launched Singapore's first 24-hour crisis helpline for migrant workers that was manned by trained crisis helpline, providing an avenue for distressed workers to reach out for assistance. By year-end, we had received over 1,800 calls, with more than 50% coming in during off-office hours. We want to thank all who have stepped up to support this much-needed round-the-clock service. This includes our growing pool of Crisis Helpline Volunteers, who undergo training by HealthServe and the Samaritans of Singapore in important skills such as emotional support provision, suicide risk assessment and management over the phone.

The helpline is part of HealthServe's four-pronged mental health programme, which includes mental wellness education for the workers, a Peer Support Leader (PSL) training programme, and the provision of specialised intervention with the Institute of Mental Health and other partners.



Mr Michael Cheah
EXECUTIVE DIRECTOR
HealthServe Ltd.

“HealthServe started as a small clinic 15 years ago, manned by just three staff who wanted to make a small difference in caring for this underserved community. It amazes us how far we have come; how we have grown; and how we have been able to serve the tens of thousands of migrant workers who come through our doors every year – with your support.”

With the introduction of the government's regional medical centres, HealthServe's clinic will focus on serving those who fall through the cracks. Drawing on our 15 years of experience in providing holistic care management for the community, we will be scaling up operations to meet the underserved needs in the areas of dental treatment, chronic disease care as well as rehabilitation services.

Alongside our focus in mental health and preventive care, we will continue to partner MOM, dormitory operators and employers to train even more PSLs – a programme aimed at building both capacity and community. Results have been encouraging. We are heartened to hear from PSLs, now empowered to not just care for themselves but their peers, that they find value and meaning in being able to identify and support those in distress. In the process, they have also forged stronger bonds with their peers.

In 2021, we also received the MOM Valued Partner Award. We are both humbled and grateful for our partners' trust and support in strengthening the care ecosystem for our migrant friends in another unprecedented year.

HealthServe started as a small clinic 15 years ago, manned by just three staff who wanted to make a small difference in caring for this underserved community. It amazes us how far we have come; how we have grown; and how we have been able to serve the tens of thousands of migrant workers who come through our doors every year – with your support.

We will continue to evolve and adapt as our workers' needs change. We thank you in advance for your continued trust and support, as we increase our capacity even further in the coming years.



About HealthServe

Founded in 2006, HealthServe is an IPC registered charity that advocates for a society where every migrant worker lives a life of health, wellbeing and dignity. As a medical NGO, we seek to bring hope and healing to the migrant worker community through the provision of holistic health and social care.

As of December 2021, there are close to 850,000 work permit holders in Singapore. Access to affordable healthcare is a common problem for low-wage migrant workers as foreigners in Singapore do not receive subsidies for healthcare at public institutions. By law, workers are supposed to be covered for both inpatient and outpatient treatment by their employers but not all are, unfortunately. In addition, high debts, a power imbalance and fear of repatriation as well as cultural and language barriers often contribute to migrant workers not seeking or receiving timely assistance or proper medical treatment.

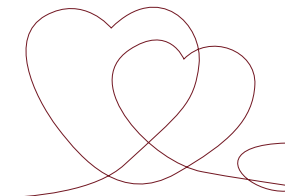
The more unfortunate amongst these workers get injured at work and may end up losing their jobs and suffering loss of pay for a protracted period. The wait for their work injury compensation applications to be processed and resolved can take months, even years.

To meet the growing needs of this disadvantaged community in Singapore, HealthServe has expanded its range of services over the years, from a small clinic providing GP services to a medical NGO that provides holistic healthcare and social support. This includes medical and dental services, mental health programmes and counselling as well as injury and salary-related casework support and other forms of social assistance.

Prior to COVID-19, HealthServe was mainly serving the most vulnerable members. With COVID-19, the entire community was in distress. The prolonged social isolation and movement restrictions, in contrast with the rest of Singapore, took a toll on the mental health of this marginalised group. Since the pandemic hit, HealthServe has

been at the forefront of caring for migrant workers' mental health and advocating for their needs and wellbeing.

Today, HealthServe remains very much a volunteer-run organisation; and a community at heart. Our work to support tens of thousands of migrant workers every year is underpinned by a large pool of medical and non-medical volunteers, partners and donors.



Our Vision

Every migrant worker lives a life of health, wellbeing and dignity

Our Mission

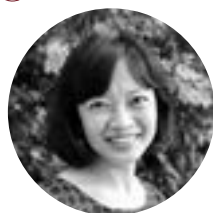
To bring hope and healing to migrant workers through the provision of holistic health and social care

To advocate for the needs and wellbeing of migrant workers

To bridge communities through meaningful engagement and partnerships

Board of Directors

As of 30 Dec 2021



Chan Chia Lin

CHAIRMAN from 1 Aug 2020
DIRECTOR from 1 Aug 2014
Nominating and HR Committee (Chairman)

Director, Lam Soon Cannery Pte Ltd
Vice President, National Council of Social Services



Dr Jeremy Lim Fung Yen

VICE CHAIRMAN from 1 Aug 2020
DIRECTOR from 17 Aug 2017
Medical Services Committee (Chairman)
Member of Nominating and HR Committee, Mental Health Advisory Panel

CEO, AMILI (Asian Microbiome Library)
Director Global Health Programme, NUS Saw Swee Hock School of Public Health



Dr Calvin Chong Peng Choon

DIRECTOR from 1 Aug 2014
Services Committee (Chairman)

Associate Professor, Singapore Bible College



Chan Kum Kit

DIRECTOR from 20 Jun 2013
Finance Committee (Chairman)

Partner, Verity Partners



Dr Chan Lai Gwen

DIRECTOR from 21 Sep 2020
Member of Mental Health Advisory Panel

Consultant, Psychiatrist, Tan Tock Seng Hospital



Choy Peng Wah

DIRECTOR from 21 Sep 2020
Fundraising and Engagement Committee (Chairman)
Member of Audit Committee

Former finance professional



Gail Lien

DIRECTOR from 21 Sep 2020
Member of Finance Committee, Services Committee

Governor, Lien Foundation



Matthew Saw Seang Kuan

DIRECTOR from 1 Mar 2012
Member of Services Committee

Partner, Lee & Lee



Serene Chee

DIRECTOR from 21 Sep 2020
Member of Finance Committee, Fundraising and Engagement Committee

Chairman, LCEC Christ Methodist Church



Susan Kong Yim Pui

DIRECTOR from 17 Aug 2017
Audit Committee (Chairman)

Director, QED Law Corporation



Board Committees

As of 30 Dec 2021

AUDIT

CHAIRMAN *Susan Kong* Board Member

MEMBERS *Choy Peng Wah* Board Member

Lee Yuit Chieng
Chief Operating Officer, LUMIQ

FINANCE

CHAIRMAN *Chan Kum Kit* Board Member

MEMBERS *Gail Lien* Board Member

Serene Chee Board Member

FUNDRAISING AND ENGAGEMENT

CHAIRMAN *Choy Peng Wah* Board Member

MEMBERS *Chandrima Das*
Global Head of Managed Investments, Standard Chartered Bank

Darren Tay
Head of Treasury Management, Fullerton Fund Management

Gopi Mirchandani
CEO, NN Investment Partners Singapore

Serene Chee Board Member

NOMINATING AND HUMAN RESOURCE

CHAIRMAN *Chan Chia Lin* Chairman of Board

MEMBERS *Dr Jeremy Lim* Vice Chairman of Board

Ms Janelle Tan
Relationship Director, Financial Services, Dunn & Partners

Janet Koh
VP of Human Resources, SMBC Nikko Securities

MEDICAL SERVICES

CHAIRMAN *Dr Jeremy Lim* Vice Chairman of Board

MEMBERS *Dr Gan Wee Hoe*
Head of Department of Occupational and Environment Medicine, Singapore General Hospital

Dr Lam Jie Feng, Joshua
Medical Doctor

Dr Shawn Vasoo
Clinical Director, National Centre for Infectious Diseases

Dr Tan Thong Kwan, Benjamin
Specialist Periodontist, Poon and Phay Dental Surgeons

Dr Yeo Cheng Hsun, Jonathon
Director and Family Physician, Family Medical Clinic Chinatown

Dr Yoong Su-Yin, Joanne
Senior Economist and Director, Research and Science, CESR East

SERVICES

CHAIRMAN *Dr Calvin Chong* Board Member

MEMBERS *Gail Lien* Board Member

Long Chey May
Group Chief Patient Officer, National University Health System

Matthew Saw Board Member

MENTAL HEALTH ADVISORY PANEL

MEMBERS *Dr Jeremy Lim* Vice Chairman of Board

Dr Chan Lai Gwen Board Member

Dr Donna Lim
Adjunct Lecturer and Counsellor, Singapore Bible College

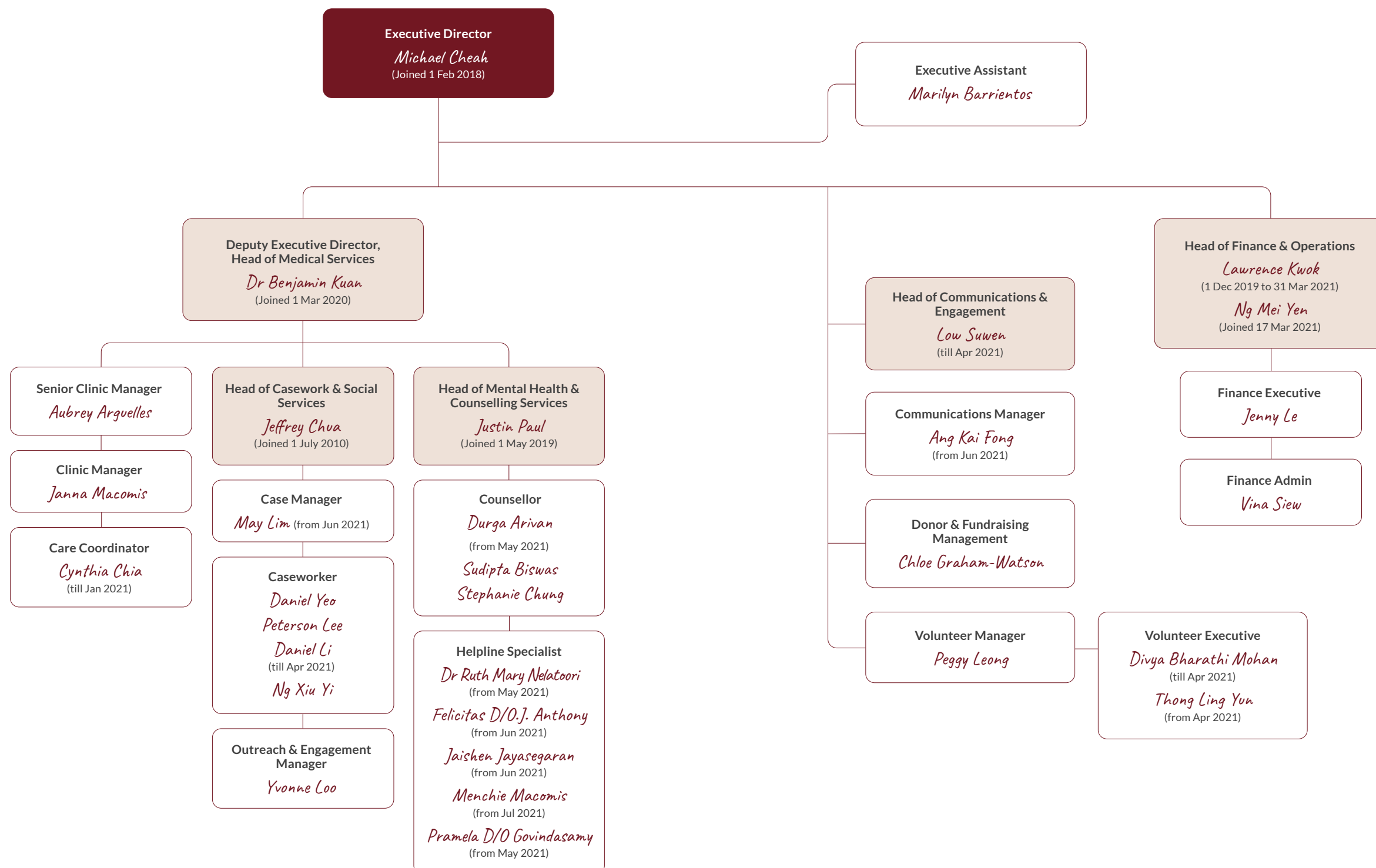
Dr Mok Yee Ming
Assistant Chairman, Medical Board (Clinical), Institute of Mental Health

Dr Mythily Subramaniam
Assistant Chairman, Medical Board (Research), Institute of Mental Health



Management and Staff Team

As of 31 Dec 2021



2021 Impact Summary

119,000

Migrant workers engaged in 2021

620

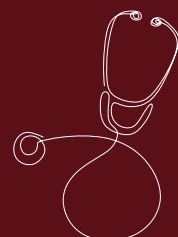
Volunteers who supported our work

Medical Services & Research



8,300

Medical consultations in total



3,900

Chronic disease consultations



2,700

Acute consultations



850

Dental consultations



690

Specialist consultations



120

Occupational and Physiotherapy consultations

Mental Health & Counselling Services



7,800

Participants of mental wellness workshops



1,900

Migrant workers supported through mental health helpline



150

Migrant workers who received counselling support



170

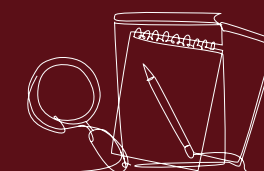
Peer Support Leaders trained

Casework & Social Services



\$135,400

Financial assistance disbursed (in cash/ kind)



1,300

Cases supported



35,900

Cases of social assistance rendered (in meals, groceries, phone and transport top-ups)

Outreach & Engagement



49,000

Migrant workers engaged through outreach events



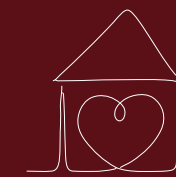
\$695,700

Social assistance disbursed (in care packs)



1,300

Participants of health screenings



19,000

Care packs distributed to workers under quarantine

Medical Services & Research



Staying Agile

We began 2021 on a hopeful note. The COVID-19 pandemic appeared to be abating with new case counts falling steadily, alongside the introduction of vaccines. Safe management measures were being scaled back, and a general optimism and hope of returning to life of normality was in the air.

Likewise at HealthServe, more workers started streaming back to our Geylang clinic to seek health assistance. We saw more patients who suffered from chronic medical conditions such as diabetes and hypertension. As a result of travel restrictions arising from COVID-19, many workers had their usual medication supplies disrupted as they were no longer able to seek affordable treatments on regular trips back home.

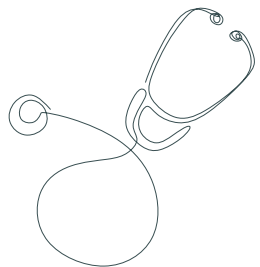
Responding to the growing needs on the ground, we formed a Medical Case Management team with two of our case workers to support patients with complex health and social issues.

Preparations were also underway to re-open our satellite clinics as more medical volunteers stepped forward, albeit gradually. Unfortunately, the Delta and subsequent Omicron-variants put a halt to our plans for reopening when volunteers once again hunkered down. Thankfully, our Medical Services team of staff, volunteers and interns was, by now, familiar and confident in executing HealthServe's telehealth framework that was developed at the height of COVID-19 in 2020.

Alongside a quick pivot to teleconsultations helmed by experienced volunteer doctors, we also established a new partnership with a neighbouring GP clinic group to see and swab migrant workers with respiratory symptoms. These measures helped to maintain our clinic capacity in addressing workers' medical needs.

2021 Impact Summary

Medical Services & Research



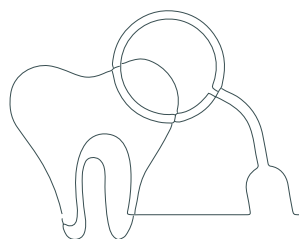
3,900

Chronic disease consultations



2,700

Acute consultations



850

Dental consultations



690

Specialist consultations



120

Occupational and Physiotherapy consultations

8,300

Total no. of medical consultations

Data-Driven Advocacy

Amidst repeated dormitory lockdowns, we soon saw MOM exploring the viability of setting up a self-sustaining network of medical centres catered for migrant workers – a move championed by HealthServe.

HealthServe's research team, backed by National University of Singapore (NUS) Saw Swee Hock School of Public Health (SSHSPH), sprang into action. We conducted ground surveys and interviews on the ground that eventually guided our feedback during consultative sessions with MOM. We were also glad to have been able to share our knowledge and experience from 15 years of meeting migrant workers' evolving medical needs.

These efforts were not in vain. MOM's announcement in November 2021 of a new primary healthcare system for migrant workers, complete with a new primary care plan, a healthcare financing scheme for employers and workers, would soon put in place a broad healthcare safety net for all low-wage migrant workers. Alongside a mandatory sign-up subscription service that avails unlimited and heavily subsidised outpatient visits, this would provide universal health coverage to the workers in a primary care setting by early 2023 – a dream come true for us!



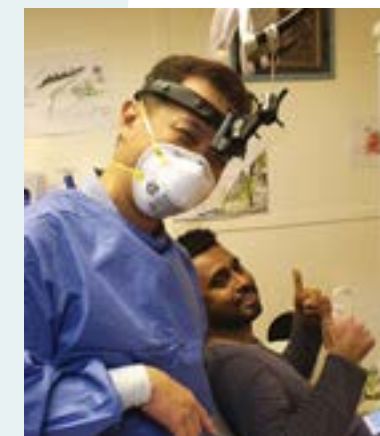


Research remains core to HealthServe's efforts in engaging, educating and empowering our migrant community in taking charge of their overall health and wellbeing. Understanding the knowledge, attitudes and practices of the migrant workers' community is key to designing programmes that are relevant and scalable. To this end, we have commenced efforts in primary research on nutrition and diet as well as a study on the level of chronic disease awareness amongst migrant workers. Concurrently, an evaluation of our Chronic Disease Management programme was done in conjunction with NUS SSHSPH, with takeaways adopted for further programme refinement.

Scaling Up to Meet Growing Dental Need

Even as the gaps in primary care are beginning to be addressed systematically by the government, dental treatment remains a growing area of need for our migrant workers.

With borders locked down and dental services being unaffordable and inaccessible for most low-wage workers in Singapore, countless suffered in silence whilst some resorted to desperate self-remedies — including extractions with their own long-toothed pliers!



Burdened by an unrelenting six-month waitlist, HealthServe installed a second dental chair in our Geylang clinic in late 2021 to double our capacity.

Coupled with external referrals to partner like-minded dentists who were able to charge low-bono rates, our team of volunteers worked hard to bring a smile to every patient.

But with effective word-of-mouth marketing by our migrant friends of HealthServe, we see more workers coming to seek dental help.

As we look to expand our dental service in the coming years, we continue to call out to willing hands and hearts in the medical and dental community to come forward to volunteer with us.

Hear From Our Migrant Friend



“

Here, I don't have a family. But HealthServe has helped me like family.

”

One day, my foot slipped and I cut my hand, and was injured on my back, foot, shoulder. I was in the ICU for 3 days, and in the hospital for 21 days.

My injury weakened me a lot. Thankfully, I am now recovered. A fellow brother from my dormitory told me about HealthServe. He said they can help. They supported me with everything, from washing powder to financial assistance, and MRT top ups... most importantly, my hand. My hand was in a bad shape. I was unable to get any therapy for my hands. Here at HealthServe, they provided therapy which helped my hand recover very well. It has gone from 30% to 70% recovered.

They have helped me with everything. If I ever had a problem at the hospital, with my company or dormitory, they would step in. They also helped me get a phone when my old one broke.

Here, I don't have a family. But HealthServe has helped me like family.



Rubel

Injured Migrant Worker From Bangladesh



Hear From Our Migrant Friend



“

It felt like my life was falling apart. But everything is in control now.

”

Shah first came to Singapore to work in hopes of providing a better life for his family of six in Bangladesh. Soon after he started work in 2007, a string of unfortunate events hit.

It began with his father's diagnosis of cancer, then his wife's stomach ulcers, followed by his own chronic medical condition – an inflammatory bowel disease that caused him to suffer from gastric issues, skin problems and chest pain.

Being the sole breadwinner, Shah was under immense pressure and took on loans to pay off mounting medical bills. His mental and physical health deteriorated as a result.

His friend introduced him to HealthServe in 2020, when he began receiving affordable and regular medical care. Our casework team also stepped in to provide financial assistance and case support, equipping Shah with a better understanding of insurance claims which helped to cover a significant \$16,000 of medical bills.

To ensure Shah continues to receive timely treatment, HealthServe provided him co-payment subsidies and also partnered a crowd-fundraising agency that helped rally support from the Singapore community.

Shah has since become more financially independent and is taking steps to seek his employer's support via a co-payment arrangement. Shah has also been successful in paying off his debts, much to his satisfaction and relief (and ours too!).

Now under the care of specialist doctors, Shah is well on the road to recovery. He shared with us that he can now sleep better and pay more attention to his health.

*Not his real name

Shah

Migrant worker from Bangladesh

Hear From Our Volunteer

“

All of the workers have so many inspiring, touching stories. I think when you start talking to them more and meeting them, you realise that they're such kind, nice souls, here to make a living, and helping them is the least that we can do.

”

Volunteering has always been a part of me. It's something that I've been doing since I was young.

During the whole pandemic, the migrant workers were among the hardest-hit members (of society). I said, 'Okay, why not?' I'll do what I can, make use of my skills (as a medical student), and try to give back.

When talking to migrant brothers, I have to break down medical terminology into really simplified phrases. When I asked them, 'Brother, have you lost weight?', they would stare at me blankly. I thought, okay, I'll change it to 'Brother, has your shirt gotten loose?' I really have to think of different ways to get the message across.

Drawings really help. I usually draw to explain to them what's going on. For example, for sinus problems, I'd draw a nose, show them what a sinus looks like, and then they try to describe where the pain is. I would write a pain scale in Bengali and draw a smiley face and a sad face, to ease the communication between us.

All of the workers have so many inspiring, touching stories. I think when you start talking to them more and meeting them, you realise that they're such kind, nice souls, here to make a living, and helping them is the least that we can do.



Lavanya

Volunteer Physician Assistant

Hear From Our Volunteer



“*HealthServe gave me the platform to contribute my expertise, knowledge and time to benefit those who are underserved and underprivileged.*”

I do believe that doing what you can with what you have, where you are, is the best thing that you can do. You don't have to travel far and wide to do good. We just need to do certain things from where we are. We can think big, but we can start small, and you know if you have passion, it will eventually pave the way for you.

... HealthServe is (an) organisation I volunteer with to serve the migrant worker population in Singapore. It really started out very fortuitously because I was asked to volunteer by an anaesthetist who was in the operating theatre with me.

This is definitely a population that can be served better, and to me that emotional attachment to them stems from the fact that my great grandfather was once a migrant worker in Singapore, and if he hadn't been treated well by our country at the time, I wouldn't be here today. I think there's a lot more that can be done to integrate our migrant worker community and to provide them with their basic needs in healthcare and other areas.

HealthServe gave me the platform to contribute my expertise, knowledge and time to benefit those who are underserved and underprivileged.

Extracted from a feature published on @humansofmedyll, an Instagram page by NUS Medical Society from Yong Loo Lin School of Medicine



Dr Hamid Razak
Volunteer Doctor

Hear From Our Intern

“*Interning at HealthServe was the perfect opportunity for me to learn more about how a clinic is run and to combine both the migrant worker community knowledge that I have with clinical experience.*”

When we went to the hospital, the doctor mentioned his condition. Only then did I realise that his condition is actually really serious, but he never once mentioned it. I think that really showed his resilience and strength.

... As a biomedical engineering student in NUS, I've always wanted to pursue post-grad medicine. I think (interning at HealthServe) was the perfect opportunity for me to learn more about how a clinic is run and to combine both the migrant worker community knowledge that I have with clinical experience.

As my clinic manager always said, “make sure that you always have your migrant brothers at heart whenever you're doing any operations in the clinic, because you're not only here to learn about clinic operations, you will also be learning about the migrant brothers and interacting with them.”

At the end of the day, you will feel physically tired, especially if you're doing roles such as running. ... But I think in the end, it's still worth it.



Thanmaya
Clinic Intern

Mental Health & Counselling Services



Even as safe management measures (SMM) gradually eased for the rest of the Singapore population through the year, 2021 remained a challenging year for the migrant worker community. While now able to return to some semblance of normalcy in returning to work and providing for their families, dormitory-dwelling workers were still largely confined to their rooms, allowed to leave only for work or to visit designated recreation centres. The social isolation from the prolonged movement restrictions further strained their mental health, with more workers experiencing symptoms of depression and anxiety over the future. This was often on top of workers' existing challenges related to health, finances and employment.

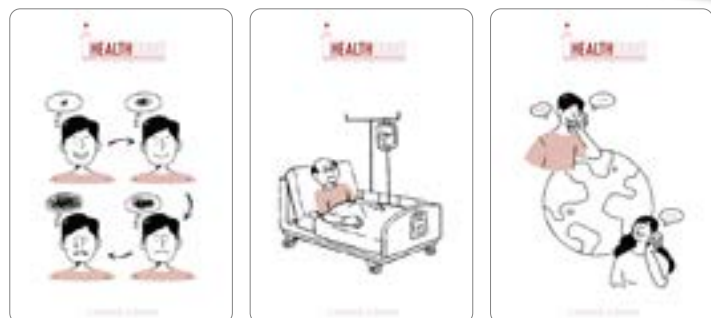
Since COVID-19 hit, HealthServe's Mental Health & Counselling Services (MHCS) team has been at the forefront of providing throughcare support to address the mental wellbeing of the migrant worker population through three key pillars of services.

Advocacy through Education

The first step towards change is awareness. In 2021, HealthServe expanded our mental health education services to raise awareness of the importance of mental health amongst both migrant workers and other important stakeholders in the overall care ecosystem, including employers. Working around the physical constraints of SMM, we held online and offline awareness building and education programmes that equipped participants with practical tips to care for themselves and others.

As part of the inter-agency Project DAWN taskforce that looks into boosting mental health awareness and support for migrant workers, HealthServe also took lead in the training of select groups of workers staying in dormitories to step up as Peer Support Leaders (PSL). Equipped with basic Psychological First Aid knowledge and skills, these PSLs are then empowered to be the first line of support for members of their own community who may be in distress or need of assistance.

Caring Cards: Creating conversations for healthy minds



Some conversations can be more difficult to start than others.

As a small organisation that is big on holistic health, we recognise the impact social connection (or lack thereof) can have on one's mental wellbeing. This is even more pertinent in today's post-pandemic world.

That's why we launched Caring Cards, a deck of picture cards that serves as a starting point for meaningful chats to happen, be it between our migrant friends or within our larger community.

When was the last time you had a thoughtful conversation with someone you cared about?

Visit: www.healthserve.org.sg/caring-cards

This initiative is supported by the National Council of Social Service and Tote Board.



2021 Impact Summary

Mental Health & Counselling Services

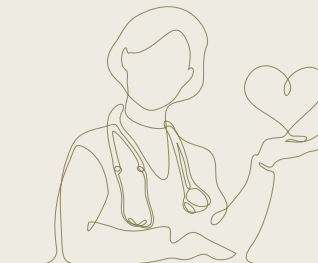


7,800

Participants of mental wellness workshops
(over 130 sessions)

1,900

Migrant workers supported through mental health helpline
(over 2,260 helpline calls)



150

Migrant workers who received counselling support
(over 480 counselling sessions)



170

Peer Support Leaders trained
(over 4 batches)

Meet Our Peer Support Leader



“(Before) it’s just work and come home, rest, sleep, then I go to work again. But now I have done something for myself, for my own happiness. So it’s (brought about) very good changes in my life,” he said. ”

Last December, Mr Hasan Samim noticed that one of his co-workers on the same project did not seem his usual self and suddenly became very quiet.

“For almost three years, he didn’t go back home ... So his father recently passed away, but he can’t go back as well, so he was mentally fully depressed,” said Mr Hasan, a Bangladeshi electrical and instrumental technician with Rotary Engineering.

At the same time, his friend was worried that if he went home, he would not be able to return to Singapore to work. But he did not know how to explain this to his company as he was not proficient in English.

Mr Hasan stepped in to speak to his friend’s supervisor, and the employer arranged for his friend to take two months’ leave to visit his family in Bangladesh.

Mr Hasan, 31, is a peer support leader who was trained by HealthServe in December to spot such signs of distress among his co-workers or dormitory mates and to help them if possible.

He feels that his peers can more easily share their problems and issues with him as they are “on the same level”, and there is no language barrier.

“So if I asked him in my (our) own language, maybe he can explain everything, understand everything. That is the difference,” he said.



Hasan Samim

Electrical and Instrumental Technician
from Bangladesh

... As part of the peer support leader training, Mr Hasan was taught to identify signs of stress, breathing techniques and how to approach and listen to a friend in distress.

Mr Hasan’s phone number is circulated at the dormitories as one of the people workers can seek help from. Mr Hasan said that he has got calls from a number of workers.

“Previously these symptoms are in front of me, but I didn’t know how to help ... So after I’m getting this training, I’m fully aware and I really understand what is the main problem,” Mr Hasan told CNA in an interview on Tuesday.

... He wants to help others like him, and helping others has made a difference to his life as well. The skills he picked up, such as meditation and ways to relax, have helped him to manage his own stress, as well as look out for others in distress.

“(Before) it’s just work and come home, rest, sleep, then I go to work again. But now I have done something for myself, for my own happiness. So it’s (brought about) very good changes in my life,” he said.”

Extracted from article published by CNA: Meet Hasan, a migrant worker helping others like him navigate life in Singapore



Meet Our Peer Support Leader



“*This could happen to another person, you know.*”

Peer support leaders, such as Mr Pandiyan Selvamurugan, 33, are trained to approach and listen to a friend in need, as well as breathing techniques, so they can be first responders to those who are troubled.

They have also been equipped to identify signs of stress, such as a sudden change in behaviour.

Just last week, Mr Pandiyan noticed that a work colleague has started to drink more frequently to the point he would get drunk.

The scaffolding supervisor at Altrad Services Singapore, a firm that provides industrial services, said he decided to approach his colleague the next day because the situation reminded him of when he lost a senior colleague to excessive drinking over a decade ago.

Recounting the incident, Mr Pandiyan, who has been working here for 14 years, said his colleague had taken a call on the fourth floor of his then-dormitory in Lim Chu Kang when he fell off the railing while in a drunken state.

“This could happen to another person, you know. So I worry about this colleague,” he said. “When he told me he had family problems, I said ‘Brother, we can find a solution. If you drink and spend a lot of money, how much are you going to send to your family?’”

Since then, Mr Pandiyan said he has been reminding his colleague to watch his alcohol intake and is supporting him to stop drinking eventually.

Extracted from article published by TODAY: Stressbusters: Meet the migrant workers trained to spot signs of distress in their community.



Pandiyan Selvamurugan
Scaffolding Supervisor from India

Hear From Our Volunteer

“*If there is anything that I learnt from him, it was his humility, especially given the constraints he has to live with!*”

When I started on the journey with HealthServe, I did not start with any expectations.

What excited me to jump on this boat was that I would be able to equip migrant workers with the ability to identify, prioritize and handle their own mental problems.

On top of that the migrant workers themselves, would also have the ability to keep a watchful eye over their colleagues, friends and roommates.

In this journey when I met Hasan, I was awestruck! He could grasp and easily identify and address mental problems of his co-workers. He was also able to connect with a neighboring friend who went radio silent for a while and stopped talking to him due to his own personal stress factors.

If there is anything that I learnt from him, was his humility, especially given the constraints he has to live with!

It makes all the late nights, driving, pick ups and drop offs worth it! Looking forward to more sessions soon.

Extracted from social media post by Suman



Suman Biswas
Volunteer Facilitator

Hear From Our Volunteer



“

As a volunteer I am grateful to HealthServe for giving me the opportunity to contribute to the society.

”

It was a wonderful opportunity for me and I have learnt a lot as a facilitator. Each session taught me something new. When I talk to the migrant brothers and they respond positively, react, sometimes share their feeling and experience I feel blessed to be a listener.

The migrant brothers are the fighters and as a facilitator if I can bring any positive changes in their lives, I shall feel myself honored. As a volunteer I am grateful to HealthServe for giving me the opportunity to contribute to the society.



Saswati Saha
Volunteer Facilitator

Singapore's First 24-hour Crisis Helpline for Migrant Workers

Despite increased access to help and service, migrant workers were still cautious when it came to sharing their difficulties and distress with those around them. To provide distressed workers a safe space where they can reach out readily for support, HealthServe launched Singapore's first 24-hour crisis helpline for the migrant worker community in Singapore in August 2021.

The service is manned by HealthServe's team of Crisis Helpline Specialists and a growing pool of Crisis Helpline Volunteers (CHVs), some of whom can speak workers' native languages. Prior to deployment, every helpline staff and volunteer is required to undergo a 14-hour skills training, held in partnership with the Samaritans of Singapore (SOS), in skills such as empathetic listening, emotional support provision and suicide risk assessment and management over the phone. For cases requiring further intervention, HealthServe's qualified counsellors, who are native speakers, will be activated.

The helpline is also open to employers and other members of the community who have concerns about workers' wellbeing.



Hear from Our Crisis Helpline Volunteer

“*There is this community who is so important to Singapore, who are so much a part of our society but we don't really pay that much attention to them.*”

I started with HealthServe as a Crisis Helpline Volunteer after the COVID-19 crisis.

There is this community who is so important to Singapore, who are so much a part of our society but we don't really pay that much attention to them and it motivated me to try and help them as much as I could.

We get all types of calls throughout the day. My experience is that during the daytime, we get calls which are more related to inquiries, information or assistance. In the evenings, the calls tend to be a little more about how they are feeling and sometimes it's some kind of crisis or in fact, even some serious interventions may be needed.

Our job as a helpline volunteer is to understand what their problem is, reassure them and ensure that they understand that there is actually hope at the end of the day.



Saurabh Bose

Crisis Helpline Volunteer

The beginning of a long but important journey



The work HealthServe does is only amplified with support from our community leaders. Sharing our vision of a society where every migrant worker lives a life of dignity, Speaker Tan Chuan Jin honoured HealthServe with a visit to our humble abode in Geylang where he met with our MHCS team. We discussed at length about some of the often-overlooked mental health needs of the migrant worker community in Singapore as well as the various initiatives HealthServe has in place to better support them.

As Speaker Tan shared, this is only the beginning of a long but important journey. As a society, let us continue to look out for the vulnerable amongst us.

If you know of a migrant worker in need of assistance, please call or refer them to HealthServe's 24-hour crisis helpline:

 **+65 3129 5000**

Caring for Those in Distress

Since the onset of the pandemic, HealthServe has extended care and support to migrant workers in need through the provision of counselling services with qualified counsellors who are native speakers. Accepting referrals from various sources, we strive towards providing distressed workers an empathetic and supportive listening ear during their most difficult of times.



thoughts and emotions, Samir considered, and even attempted, self-harm on a few occasions.

It was clear to me that Samir showed signs of severe depression and struggled with self-esteem issues. I also discovered that he had created a new identity to cope with his depression. Having this new identity got him through each day without hurting himself, but in doing so, he had lost his sense of self.

As our sessions progressed, Samir shared that he felt a deep sense of relief. Now that he could finally talk to someone about his feelings aloud, he “could finally feel hope” for the first time in three years.

Thankfully, his repatriation back home was soon approved after the authorities took into consideration our mental health assessment of Samir.

I worked closely with Samir on setting new goals, allowing him to gain confidence in himself gradually. He was focused and diligent in making change. The eventual transformation in his behaviour, attitude and sleep patterns was evident – he began smiling more and “could feel (his) lost self-identity”, even holding hope for his future. These baby steps would go a long way towards his recovery.

Two months after being referred to HealthServe, Samir returned home safely. The smile on his face when he boarded the plane was priceless. He was not just happy about returning home but returning as himself – the son his parents had lost two years ago.

Samir is still in contact with me and continues to receive counselling in his hometown to help with his depression and sleep issues.

*Not his real name



Durga Arivan
Counsellor

Hear From Our Counsellor

“ *This new sense of hope gave him a thought of contemplation to change.* ”

Initially, it was difficult for Samir* to build trust with me. It took a few sessions, but he eventually opened up and disclosed the traumatic experience he had gone through – he had been a critical witness to a fatality at work. He was then not allowed to continue working and instead remained in Singapore as a legal witness.

Without work, Samir could only stay in his room. For over two years, he remained isolated and refused contact with other people, including his family. Alongside his lack of income, his family eventually gave up on him. Overwhelmed by negative

Casework & Social Services



As Singapore entered the second year of COVID-19, many in the migrant community continued to be deeply affected, from infected individuals to those under quarantine or recovery. Working in tandem with MOM Assurance, Care and Engagement (ACE) Group, our Casework & Social Services (CWSS) team strived to navigate and adapt to the evolving COVID-19 protocols to assist our clients in the best manner possible.

Leveraging technology to mitigate challenges posed by SMM, we continued to engage clients through a range of initiatives and schemes, both existing and new. For instance, we supported migrant workers with meal collection and facilitated groupwork sessions via Zoom. With the set-up of our 24/7 crisis helpline that gave distressed workers an avenue to reach out to native speakers in our team round the clock, we also expanded the CWSS team's focus to look into the increasing helpline referrals. By end-2021, we had received over 380 referrals that required casework assistance, from COVID-19-related enquiries to employment and repatriation challenges.

With the support of close to 20 interns and volunteers, we reached out to over 1000 Special Pass* holders in 2021.

*A Special Pass card allows a foreigner to stay in Singapore while assisting in investigation, work injury claims or salary claims. Foreigners who are issued Special Passes are not allowed to work in Singapore.

Supporting Distressed Migrant Brothers in the New Normal

Amidst prolonged movement restrictions through the year, we made almost 470 visits to clients on Special Passes who were residing in various dormitories all over Singapore. We continued to provide them support in the form of basic necessities such as food and groceries, phone value top-ups as well as transport subsidies.

We are relieved to see a considerable drop in the number of migrant workers approaching us for support in provision of meals, relative to previous years. This positive decline could be attributed to stronger support from both employers as well as MOM's Forward Assurance and Support Teams (FAST) officers, who have been deployed on the ground since COVID-19, helping to ensure that our migrant workers are better cared for – a position HealthServe has strongly advocated for across multiple fronts.

“It’s nice to come out and see the sun”

In February, HealthServe resumed our popular “Walk and Be Well” programme for Special Pass holders. This signature wellness initiative aims to bring workers out of their dormitories and residences to go on therapeutic strolls in nature, allowing them some respite from their stressors. Notwithstanding the Heightened Alert phase, we visited different areas of interest in 2021, from Gardens by the Bay to Jurong Bird Park and Lakeside Gardens.



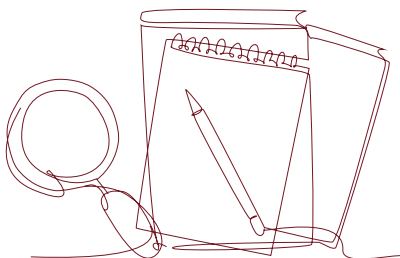


2021 Impact Summary

Casework & Social Services

35,900

Cases of social assistance rendered (in meals, groceries, phone and transport top-ups)



1,300

Cases supported



\$135,400

Financial assistance disbursed (in cash/ kind)

Going Home Programme

Although we had to move some rehabilitation sessions online due to SMM, we are thankful to be able to continue our Going Home Programme for over 70 injured workers throughout the year.

Following unfortunate work injuries that render them unable to continue working in Singapore, migrant workers are often concerned about how to manage their conditions and pain upon their return home, and when or how they can continue to work or sustain a livelihood. As part of the Going Home Programme, the CWSS team, supported by volunteer occupational therapists, holds regular occupational therapy sessions for clients



who have work injuries, specifically those who have been injured for close to a year or more, and continue to experience significant symptoms and concerns about their health. The support and guidance rendered to injured workers would be in the context of their imminent return

home, wherein their existing support and healthcare provisions in Singapore may be discontinued, and continuity of care in their home country could be ambiguous or uncertain, depending on one's socio-economic status.

Strength in Numbers

Anchored by CWSS staff and interns, we also piloted groupwork sessions in the second half of 2021, where we gathered injured Special Pass holders in small groups to explore topics relating to their wellbeing that were less frequently discussed. These included stress management, emotional regulation and forgiveness.

Another new area of focus saw our caseworkers assisting clinic patients with chronic illnesses such as diabetes, high blood pressure and other health concerns. Many of them have little or no support from their employers. In such unfortunate situations, our caseworkers would step in to render various forms of medical support, from arranging and booking of specialist appointments and follow-up treatments to accompanying them for these sessions, as well as provision of financial assistance.

Community Outreach & Engagement

At HealthServe, we aim to build a community where migrant workers feel accepted and supported. To this end, we conduct regular outreach initiatives to meaningfully engage and uplift the lives of our migrant friends, whether they reside in dormitories or the community. From house visits to small-group English enrichment classes, art and music engagement sessions, these programmes never fail to put a smile on migrant workers' faces.

We also distributed care packs to workers who were under quarantine, reminding them that they were not alone in Singapore; and that help is available should they require assistance.

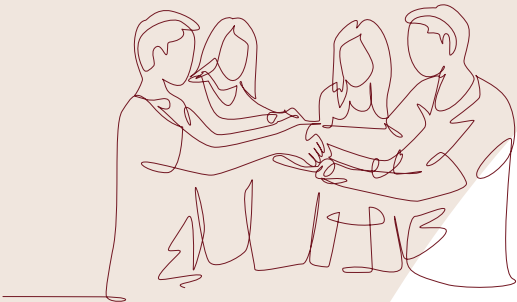
Growing a community takes another. We are thankful for the support of multiple like-minded organisations, corporations and volunteers in our regular community events and monthly health screenings across Recreation Centres, where we promoted healthier living and awareness of HealthServe's services. In 2021, we reached over 53,000 migrant workers through 65 outreach events.





2021 Impact Summary

Outreach & Engagement



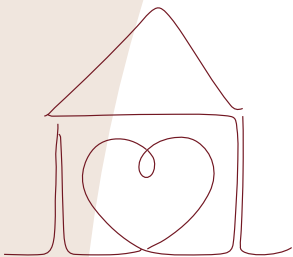
49,000

Migrant workers engaged over 60 engagement events



1,300

Participants of 5 health screening events



19,000

Care packs distributed to workers under quarantine

67,700

Migrant workers reached via outreach efforts

Hear From Our Migrant Friend



“
My life would be so different if not for their help. I don't really know how to say it, but my life would be so different.
”

HealthServe has been really helpful to me, especially with my medical expenses. They helped me with everything and I was very grateful because I couldn't approach anyone else for help during those times.

They gave me meal coupons for two meals a day. They helped to pay my rent. They also helped to top up my phone. I was also given clothes.

If HealthServe didn't help me, I couldn't have done anything. I didn't have a job for six months, but I still needed a place to stay, had to eat and call my family. I actually didn't tell my family back at home that I lost my job because they will get very worried. I went to HealthServe right after my friend told me about them, and I really got so much help from them like my friend promised.

My life would be so different if not for their help. I don't really know how to say it, but my life would be so different.



Dhinesh
Injured Factory Worker from India

Hear From Our Caseworker



“*He shared that while he was still grieving his mother’s death, he is now hopeful for the future.*”

Sali* had not been working for four months as he was on Special Pass for a police investigation.

We soon learned that Sali’s mother, who he was very close with, had recently passed on. Even while grieving, he faced pressure from his family to send money home for the funeral. These led to him developing negative thoughts. Concerned, I worked closely with the ACE officer who referred him to establish a safety plan for Sali.

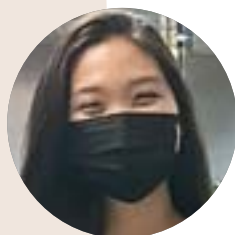
Sali often exhibited agitation and anger as he spoke with me over the phone. Striking a balance between giving him space to express himself and being firm in guiding him to seek help, I began to build rapport with him and offered him different options. Together with our counsellor, we worked on providing Sali the support he needed.

As Sali gradually opened up, he shared with us that in his culture, one goes for a shave or haircut as a form of respect to an elder’s passing. On the day he received financial assistance from HealthServe, he ran to the barber shop in the dormitory and returned 20 minutes later with a fresh shave and a huge smile on his face. It had upset him that not only could he not be by his mother’s side when she passed on, he was also unable to honour her by getting a haircut, as he did not have a single cent on him.

Sali returned home safely the following week. He shared that while he was still grieving his mother’s death, he is now hopeful for the future. He hopes to remain optimistic because he knows that was what his mother wished for him.

We wish the best for Sali, too.

*Not his real name



Ng Xiuyi
Caseworker

Hear From Our Intern

“*HealthServe views migrant workers as clients who are empowered to take on certain challenges on their own.*”

As a second-year student at Yale-NUS College, Celine first learned about HealthServe while working on a policy research project about migrant workers’ access to mental health resources during the COVID-19 pandemic.

“I wanted to learn from conversations with migrant workers instead of just reading stories about them.”

While on the job, Celine picked up essential social work skills such as how to assess intakes and how to administer social services. Her heart to serve and a firm grasp of Mandarin helped ease her into her role as she started supporting Chinese-speaking migrant brothers who approached HealthServe for assistance via our 24-hour crisis helpline.

As a beginner in this field, Celine shared that she initially found it challenging to navigate between her desire to help as much as she could and being realistic about possible outcomes of a worker’s case. She also learned that often, instead of problem-solving for migrant workers undergoing complex work injury cases or salary claims, the role HealthServe plays is to be a pillar of support and to journey with them.

“HealthServe views migrant workers as clients who are empowered to take on certain challenges on their own.

Once people have conversations with migrant workers, they will realise that they are just like any other person who is here to work. They have their own stories.”



Celine
Casework & Social Services Intern

Hear From Our Migrant Friend



“Everything focus is to take care of the children. My life now no thinking. Now, very hard job I do, I okay.”

Ali Mohmin first arrived in Singapore on 31 May 1993 - a day he could still recall vividly. For the next 30 years, Ali worked tirelessly in Singapore's construction sector, where he helped to build HDB flats.

In 2012, Ali was diagnosed with diabetes. However, Ali did not think it was a cause for concern as he was young, healthy and active. He never sought proper treatment. It was years later that Ali started to feel his body getting weaker.

Ali first consulted HealthServe's doctors in September 2021. Since then, he has been visiting our clinic regularly to keep his condition under control, and now feels healthier. Ali has also picked up the habit of cycling to work every day to keep fit.

On one visit to HealthServe, Ali participated in our art engagement activity for the first time. Having always been busy with work, Ali shared that he has never had time to explore his hobbies and interests.

“When resting, it's time to call family and talk, cook, washing, then sleep.”

Ali appreciated the opportunity to just relax. Reminded of how much his daughter enjoyed drawing flowers back at home, Ali decided to draw one too. Although he misses his family a lot, Ali always reminds himself to take it all in stride. He believes that these sacrifices are part and parcel of his journey to build a brighter future for his family, especially his three school-going children.

“Everything focus is to take care of the children. My life now no thinking. Now, very hard job I do, I okay. But next time, my son don't do this hard job. Just work easy job.”



Ali Mohmin

Construction Worker from Bangladesh

Hear From Our Volunteer

“What's important is to actually take the time to engage with each brother as an individual.”

At one outreach event, I distributed gifts and encouraged the brothers to return for our next event in two weeks. At our next event, a couple of brothers greeted me and said, 'We came back!' And it was wonderful. It made me feel that we really do benefit them.

For each brother who comes to you at an event, you're the only face they see. So what's important is to actually take the time to engage with each brother as an individual.

I've had no issues with communication. Even though we're all wearing masks, you can see if someone's smiling and engaged. It's quite amazing. They're very respectful, very gracious.

The exhilaration that you feel when you walk out of an event after several hours of working hard — it's just wonderful, the fact that you may have made a difference, highlighted a health need, provided some guidance and support.

I've come to Singapore here as an expat. It's great to also be able to give back to the country that has been very good to us.

Volunteering gave me so much more purpose, drive and focus. It's impacted my life so much that I feel like there's more scope to 'Kylie' now. It gave me more awareness of diversity and of different people's challenges.



Kylie

Volunteer Health Ambassador

Community Engagement



Well wishes drawn with love by our young supporters from Gateway Arts and Zheng Hua Primary School

15 Years of Healing, inspiring and Bridging Communities

In 2021, we turned 15 – a milestone that would not have been possible without the support of our growing HealthServe community of migrant workers, volunteers, staff and interns, donors, partners and supporters alike.

From a “mom-and-pop clinic” – affectionately coined by our well-loved and respected co-founder Dr Goh Wei Leong – in 2006 to a medical NGO today with a voice for migrant workers, we were only able to come this far, with your trust and support.

For our virtual 15th anniversary celebrations, some of our migrant brothers who dialed in from overseas surprised us with the sweetest well wishes. In their words, “thank you everyone for your generosity and kindness, taking care of all migrant brothers in Singapore and making our lives bright.”

We could not have expressed it better. This shared gratitude extends to each and every supporter of HealthServe. Here’s to many more 15 years to come!

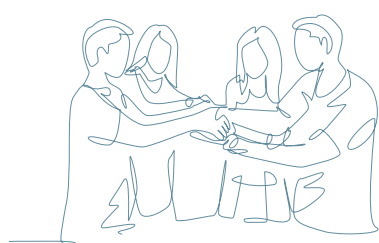


Journeying with Our Volunteers

Amidst a year of fluctuating safe management measures and guidelines, we are grateful for the support of the 620 volunteers who continued to lend their time, skills and heart to HealthServe and the migrant workers we serve.

We were immensely encouraged when over 150 individuals responded to our call for volunteers to support our newly launched 24-hour crisis helpline – a first but much-needed service for migrant workers in Singapore. Volunteer applicants completed a 14-hour online training, jointly provided by HealthServe and the Samaritans of Singapore, in essential skills such as empathetic listening, emotional support provision and suicide risk assessment and management over the phone. We are also thankful to find like-minded corporate volunteering partners in Barclays, BridgAble, J.P. Morgan and RSVP Singapore which committed to supporting the new service.

Today, HealthServe remains very much a volunteer-backed organisation. Hand in hand with you, we continue to work towards a society where every migrant worker lives a life of health, wellbeing and dignity.



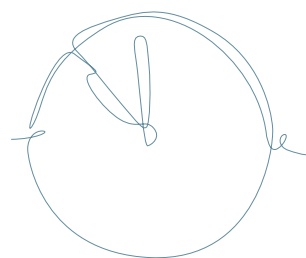
620

volunteers



330

new volunteers



9,940

volunteering hours, across all of HealthServe's services and programmes

Other Highlights

“Heroes of Our Time” Art Exhibition

ION Art Gallery, March 2021

Co-organised by the National Healthcare Group and Singapore Art Society, “Heroes of Our Time” is an exhibition of artworks paying tribute to healthcare and essential workers during the COVID-19 pandemic. The exhibition captured perspectives on the pandemic from across Singapore society featuring works of budding to professional artists of all ages, from all walks of life.

We were proud to be able to showcase our talented migrant artists' creative works that shed light on their journey and reflections during the pandemic. These included pottery pieces from HealthServe's collaboration with Studio Asobi to Special Pass holders' drawings from art engagement sessions at HealthServe's Geylang space, and other inspiring stories.

To many of our migrant brothers, art is a channel for them to express their thoughts and feelings freely. It's where their stories and desires come alive.

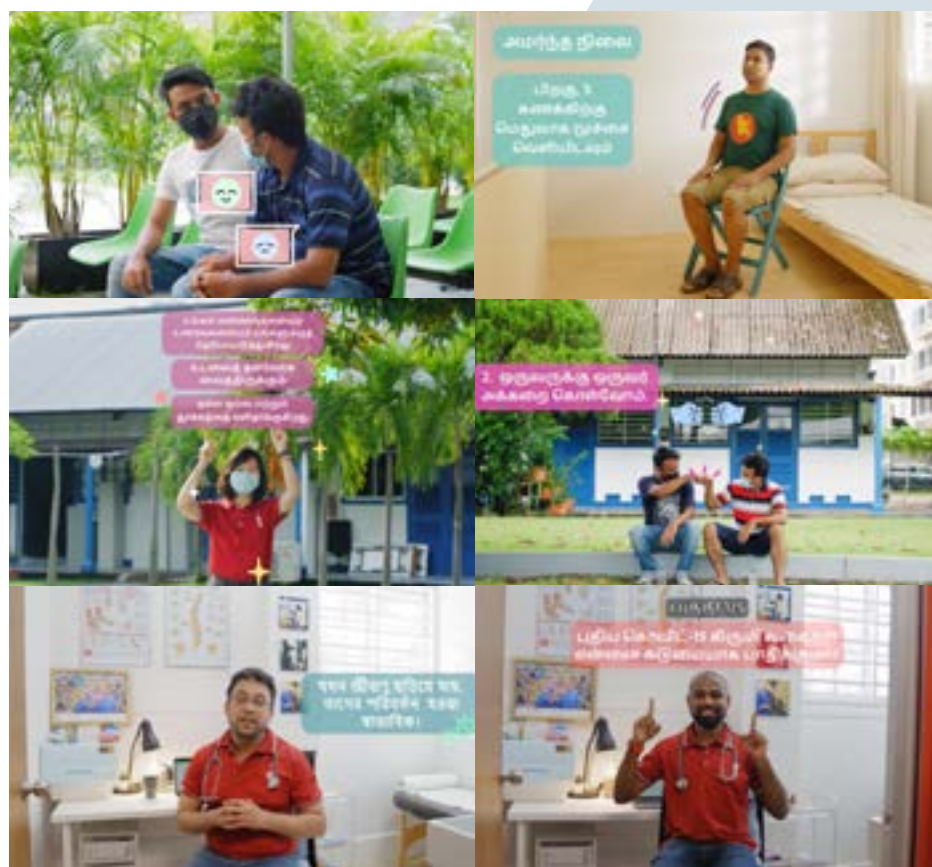
“When drawing, lonely or not also no issue, time passes like within a snap of the finger.” Tamil, migrant friend from Tamil Nadu



Keeping Well with #HealthServeTips

To build awareness of healthier living as well as HealthServe's new 24-hour helpline, we launched #HealthServeTips, an educational series featuring bite-sized content nuggets addressing COVID-19 FAQs and mental wellness.

Supported by the Ministry of Communications and Information, our volunteer doctors Dr Muntasir Mannan Choudhury and Dr Hamid Razak as well as 24Asia, the light-hearted series were released in two languages – Bengali and Tamil. They gained quick traction amongst our migrant friends on Facebook and TikTok!



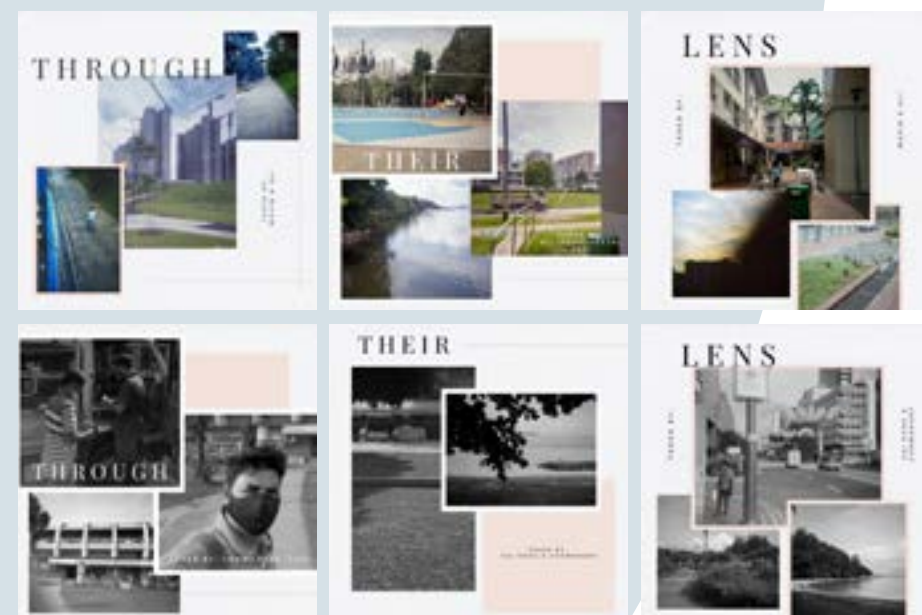
Singapore, #ThroughTheirLens

December 2021

What does Singapore look like to those who build our homes?

For one month, we gave film cameras, kindly sponsored by film.io, to a group of migrant workers who are friends of HealthServe, and invited them to share with us some moments in their daily lives.

Released in a two-part series on Instagram, you can get a glimpse of the streets they walked, neighbourhoods they visited, and sunsets they savoured, below.



#ThroughTheirLens is part of #TheDifferentHatsWeWear campaign, jointly led by HealthServe and the talented volunteer students from WeeVo, a volunteer programme under NTU's Wee Kim Wee School of Communication and Information, to commemorate International Volunteer Day and International Migrants' Day.

Fundraising & Donations

Total amount raised

\$3,121,000

Total no. of donors

1,980

Individual donors:
1,880

Corporate donors: 100



We are truly thankful for our generous donors' support for HealthServe and the migrant worker community in Singapore. We could not have served the thousands of migrant workers who came through our doors in 2021 without you.

Over 1,900 individuals, corporates, foundations, churches and other institutions donated towards HealthServe's work in 2021.

A special mention must go to design collective Paperspace Asia which volunteered its expertise and services for the renovation of our Geylang office. Over 10 months, Paperspace Asia assembled a team of 30 partners and donors and saw through the extensive project, from interior design and contractor engagement to renovation and construction works. HealthServe's office now has a new consultation room and therapy centre – the former serves as a cosy café space for our migrant friends in need to confide in our social workers while the latter, a calm environment for injured workers to receive occupational and physiotherapy.





Key Fundraising Events

The Sound Inside

Singapore Repertory Theatre, April 2021

Do you hear The Sound Inside?

In partnership with the Singapore Repertory Theatre, HealthServe presented two screenings of The Sound Inside, written by award-winning playwright Adam Rapp, to close to 200 guests and supporters alike on Saturday, 17 April 2021. Weaving a tale of human connection through two characters' unexpected friendship, the moving play highlighted the challenges of solitude and meaning seeking, an experience that resonated with many of us during the pandemic.

Relative to the rest of the general Singapore population, our migrant worker community had it worse. Mental distress, exacerbated by prolonged movement and travel restrictions and social isolation, remained a huge challenge for many of them in 2021. The Sound Inside was held to raise funds to support the expansion of HealthServe's comprehensive mental health programme, including a new 24-hour crisis hotline for migrant workers.

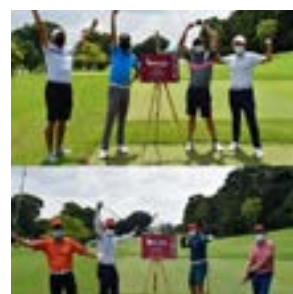
With the help and generosity of our donors and supporters, we were able to raise over \$100,000 in ticket sales to push forward our efforts in scaling up mental health initiatives for migrant workers. Thank you to all who made our first in-person fundraising event since COVID-19 possible!



HealthServe Charity Golf 2021

Sentosa Golf Course, July 2021

On 16 July 2021, HealthServe hosted our annual Charity Golf event at Sentosa Golf Course! Now into its second year, 40 players came together to golf for a good cause. The generous support of our corporate donors allows us



to continue bringing healing and hope to the migrant worker community through the provision of holistic healthcare - from medical and mental health services to casework and other social support. We successfully raised over \$100,000!



We would like to acknowledge our partners Andy Lim, Apricot Foundation, Kimly Construction Pte. Ltd., Lye Peng Yee, Salt & Light, Samuel Nee, The Singapore Contractors Association Limited (SCAL), S T Telemedia, Woh Hup (Private) Limited and WWRC. A special thanks to Tong Eng Group for sponsoring the event!

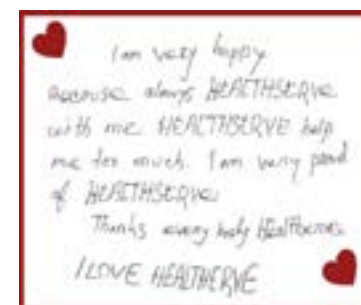
#ManyHelpingHands Fundraising Campaign

November 2021

Did you know that 50% of migrant workers who visit HealthServe's clinic suffer from at least one chronic medical condition?



To keep migrant workers' medical fees low amid the pandemic, HealthServe partnered Republic Polytechnic students to launch a fundraising campaign titled #ManyHelpingHands in November 2021.



Some 640 donors helped to raise over \$600,000, including dollar-by-dollar matching by Singapore Tote Board through the Enhanced Fund-Raising Programme grant. Funds raised went towards supporting the rising number of migrant workers in Singapore in need of proper medical care in areas of chronic disease management, dental treatment as well as occupational and physiotherapy services.

To all who supported in one way or another, thank you for being part of HealthServe #ManyHelping Hands.

We are grateful for the generous support by the following
Corporate and Individual donors:

\$200,000 - \$499,999:

- Chen Su Lan Trust

\$100,000 - \$199,999:

- Barclays Bank PLC
- Far East Organization
- LyGH Capital Pte Ltd

\$50,000 - \$99,999:

- Tong Eng Group
- SymAsia Singapore Fund – Ashlee Foundation
- The Community Foundation of Singapore

\$10,000 - \$49,999:

- Alfa Tech Vestasia Pte Ltd
- Azalea Investment Management Pte Ltd
- Centurion Corporation Limited
- Charities Trust
- Dloh Strategic Development Pte Ltd
- Holywell Foundation Limited
- Sky Top Investments Pte Ltd
- STT Tai Seng Pte Ltd
- Tanoto Foundation
- Tantallon Capital Advisors Pte Ltd
- Tee Up Dormitory Pte Ltd
- Wesley Methodist Church
- Wilalex Limited
- Woh Hup (Private) Limited
- Yeoman Capital Management Pte Ltd

Up to \$9,999:

- Alliance Concrete Singapore Pt Ltd
- Alpine Corporate Services Pte Ltd
- Amazing Trekkers Pte Ltd
- Amica Law LLC
- APCO Worldwide
- Astec Technology Pte Ltd
- Astuitone Pte Ltd
- B.A.C.S Private Limited
- Baker & Mckenzie Wong & Leow
- Biblical Graduate School of Theology

- BNL Engineering Private Limited
- Bridgewater Holdings Private Limited
- Chen Yi Construction Pte Ltd
- Chian Teck Realty Pte Ltd
- Christ Methodist Church
- Citizen Adventures Private Limited
- Corestaff Pte Ltd
- Corten Interior Solutions Pte Ltd
- Covenant Evangelical Free Church
- Day & Night Services Private Limited
- Dr Warren Lee Paediatrics Growth & Diabetes Centre Pte Ltd
- Eastspring Investments (Singapore) Limited
- ERSS Consultants Pte Ltd
- Far Eastern Kindergarten
- GC Tax Services Pte Ltd
- Gensler Singapore Pte Ltd
- Gracefield Foundation Ltd
- Grateful Dress
- GSK Group Pte Ltd
- HL Suntek Insurance Brokers Pte Ltd
- I O Pte Ltd
- JEL Maintenance Pte Ltd
- JOH Safety Consultancy Pte Ltd
- Kai Peng Construction Singapore Pte Ltd
- Kembla Air-con (S) Pte Ltd
- Kimly Construction Pte Ltd
- Kingdomcity Singapore Limited
- Kiri Capital (Singapore) Pte Ltd
- Klareco Communications Pte Ltd
- KTP Consultants Pte Ltd
- Loh Sze Hup General Contractor Pte Ltd
- Loomis Sayles Investment Asia Pte Ltd
- Lynx Analytics Pte Ltd
- Mapei Far East Pte Ltd
- Maxbond Singapore Pte Ltd
- Merdeka Construction Co. Pte Ltd
- Metalix Pte Ltd
- Netatech Engineering Pte

- OAS Painting Construction Pte Ltd
- Ozone-Wide Pte Ltd
- Panframe (S) Pte Ltd
- Q.E.D. Law Corporation
- Queenstown Baptist Church of Singapore
- Rimex Supply Singapore Pte Ltd
- Sante Crane & Equipment Pte Ltd
- Securicks Pte Ltd
- Shake Shack Singapore Jewel Pte Ltd
- Shook Lin & Bok LLP
- Sin Wei Gas Supply Pte Ltd
- Sprinkler Engineering Pte Ltd
- Super Bend Pte Ltd
- Swiftskill Engineering Pte Ltd
- SymAsia Singapore Fund – Apricot Capital Foundation
- SymAsia Singapore Fund – Yong Hon Kong Foundation
- Tat Hong Heavyequipment Pte Ltd
- Teamtech Private Limited
- Techwood Studio Pte Ltd
- The Bible Church Singapore
- The Singapore Contractors Association Limited
- Transport Capital Pte Ltd
- True Way Presbyterian Church

- Tulsi Ong Trust
- Universal Solution Pte Ltd
- UV-System Pte Ltd
- Warburg Pincus Singapore Pte Ltd
- WWRC Singapore Pte Ltd
- Zhenghua Primary School

Individual Donors \$10,000 & above:

- Allyson Tan Swee Lin
- Andress Goh Lai Yan
- Andrew Lee Kok Keng
- Ashish Shastri
- Caesar Sengupta
- Christopher Lien Tsung Chien
- Gregory Marler
- Lee I Wen
- Loh Shin Wah
- Manas Tamotia
- Michael Lien
- Nadathur Anand
- Patrick Yeo
- Pauline Cheong
- Philip Eng
- Philip Tao Hing Wang
- Willian Gek Sun Tok
- Goh Yew Lin

We are thankful to receive donations in-kind from the following organisations:

- Aban Singapore Pte Ltd
- CMSC
- Crown Construction Pte Ltd
- DFI Retail Group
- EastSpring Investments (Singapore) Limited
- Harvest Centre
- Haw Par Corporation Ltd
- Health Promotion Board
- Kokubu Commonwealth Trading
- Lighthouse Club
- Mahtani Pte Ltd
- Medcore International
- My Brother SG
- Nuform System Asia Pte Ltd
- Project Chulia Street
- Singapore Airlines
- SingHealth CCF Team

For 2021, HealthServe's fundraising efficiency was 5.9%.

Hear From Our Corporate Donor



Barclays

“We wanted to show support for the migrant worker community that has played a critical role in building Singapore as a nation. By partnering with organisations like HealthServe who play an important role in our society, we hope to be able to make a positive and sustainable impact to the communities that we live and work in.”

At Barclays, we are committed to supporting the communities that we operate in and our Citizenship efforts play a critical role in this. We recognize that our success is linked to the progress of the people, communities and businesses that we serve. Through Barclays LifeSkills, we seek to tackle the deeper challenges that vulnerable communities face by developing tailored interventions with charity partners to support people in breaking down barriers to get into, or progress in work. Challenges such as in-work poverty, an ageing workforce, young people not in – or at risk of not being in – education, and mental health issues.

In Singapore, prolonged lockdown of migrant workers in dormitories and other residences by the Singapore government to control the spread of COVID-19 have resulted in a dramatic increase in adverse mental health incidents – including numerous reported and unreported cases of suicides and self-harming incidents. In order to better support the migrant workers’ mental well-being, Barclays has extended our support to provide HealthServe with the resources and skills to set up a 24-hour crisis helpline that relies heavily on volunteers as para-counsellors. Through the LifeSkills training programme for HealthServe’s employees and volunteers, HealthServe is now better equipped to operate the crisis helpline around the clock.

Mr Alexander Harrison

Country CEO, Singapore and Head of Corporate Banking, Asia Pacific and Middle East, Barclays



“HealthServe is a prime example of responding dynamically to evolving needs of underrepresented and underserved communities, exacerbated by the pandemic. We are heartened that our support has enabled HealthServe to upskill internally while providing vital relief to this group of vulnerable migrant workers,” says Ms. Hui Joo Hoo, Managing Director and Head of Compliance, APAC, Barclays.

Barclays stands with HealthServe in building a society where every migrant worker lives a life of dignity. Our support will enable HealthServe to upskill their employees and volunteers and in turn, better serve the needs of the vulnerable migrant workers during such challenging times. In the long run, Barclays hopes to support migrant workers into better and sustained employment through upskilling opportunities.

“We wanted to show support for the migrant worker community that has played a critical role in building Singapore as a nation. By partnering with organisations like HealthServe who play an important role in our society, we hope to be able to make a positive and sustainable impact to the communities that we live and work in,” says Mr. Alexander Harrison, COO, APAC and Country CEO, Singapore, Barclays.

“HealthServe is a prime example of responding dynamically to evolving needs of underrepresented and underserved communities, exacerbated by the pandemic. We are heartened that our support has enabled HealthServe to upskill internally while providing vital relief to this group of vulnerable migrant workers.”

Ms Hui Joo Hoo

Managing Director and Head of Compliance, APAC, Barclays



Hear From Our Corporate Donor



Lighthouse Club Singapore

“We at Lighthouse Club Singapore are grateful for the opportunity to join efforts with HealthServe, to raise healthcare awareness for those amongst us who have helped to build Singapore.”

Lighthouse Club Singapore (LHC Sg) continued to support HealthServe in many ways in 2021, from fundraising to volunteering at various outreach and engagement efforts with our migrant brothers.

The team volunteered at many of HealthServe’s health screening events where they engaged and educated migrant friends on the importance of their own health and wellbeing. LHC Sg also contributed useful items and gifts from health screening equipment to power banks which were a hit with many migrant brothers! Reflecting HealthServe’s 24-hour crisis helpline, the power banks were thoughtfully customised for workers to remind them that help is always on hand should they require assistance.

During the height of the COVID-19 pandemic, LHC Sg also took it upon themselves to donate reusable face masks as part of the care packages HealthServe distributed to migrant workers under quarantine. Many workers we met on these visits were both thankful and encouraged to know that they were not alone in Singapore.



As an international construction charity that seeks to build networks within the industry to do good, LHC Sg shares the same belief in HealthServe’s mission of caring and advocating for migrant workers while bridging communities. In addition, HealthServe’s progressive and collaborative approach in managing complex migrant worker issues in Singapore has also struck a chord with LHC Sg. When approached, Karthini M, a Lighthouse Club council member said that “We at Lighthouse Club Singapore are grateful for the opportunity to join efforts with HealthServe, to raise healthcare awareness for those amongst us who have helped to build Singapore. It has been such an enriching and fulfilling journey we’ve been on, in the hopes that we’d be able to bring hope and healing to our migrant brothers. We are truly inspired by the work HealthServe does, and we look forward to many years of collaboration ahead.”

Karthini M

Lighthouse Club Singapore
Council Member

Hear From Our Corporate Donor



Tong Eng Group

“Tong Eng is heartened to be a part of HealthServe’s journey to improving the lives of migrant workers. We hope to continue creating a deeper long-term impact on the lives of migrant workers together with HealthServe.”

Mental health distress is a significant challenge faced by the migrant worker community. The COVID-19 pandemic, with prolonged lockdowns, loss of work and income, added to their traditional sources of stress including large debts, homesickness, lack of support, and language and cultural differences.

In 2021, HealthServe expanded its range of mental health services to include self-help and community-wide education on psychological first aid, a 24/7 crisis helpline for migrant workers, counselling support and other specialised services.

Having been in real estate development for more than 70 years since the 1950s, Tong Eng Group recognises that migrant workers are key stakeholders of the Built Environment sector. Tong Eng is supportive of HealthServe’s mission “to bring hope and healing to migrant workers through the provision of holistic health and social care”.

Hoping to encourage fellow industry players to uplift the migrant worker community, Tong Eng ran a dollar-for-dollar matching campaign from 14 June 2021 to 31 Aug 2021 on Giving.Sg.

Tong Eng is heartened to be a part of HealthServe’s journey to improving the lives of migrant workers. We hope to continue creating a deeper long-term impact on the lives of migrant workers together with HealthServe.

Eunice Teo

Tong Eng Group





Corporate Governance

The Board of Directors of HealthServe (the Board) recognises that good governance (establishing and maintaining a governance framework and processes concerned with managing the overall direction, effectiveness, supervision, risk management and accountability) is critical in ensuring that HealthServe is effective, transparent, sustainable and accountable to all stakeholders. In this regard, the Board and Management have been working towards establishing good practices that are in compliance with the recommendations of the Code of Governance for Charities and Institutions of Public Character issued by the Charity Council (April 2017) (the Code) as are applicable to HealthServe. This report highlights the Corporate Governance practices that are in place during the Financial Year ending 31 December 2021 (FY 2021). We are pleased to report that HealthServe has complied with the recommendations in the Code in all material respects. We have completed and uploaded the Governance Evaluation Checklist for FY 2021 and this is available for viewing by members of the public on our website as well as the Charity Portal.

BOARD GOVERNANCE

Composition of the Board and Board Independence

1. Independence

The Board is comprised of ten (10) members* (Directors) who are all independent; there are no staff members on the Board. None of the Directors is related to any staff member. The Directors do not receive any remuneration for their services as Directors. All Directors are required to make a declaration of their independence and any potential or actual conflict of interest at least annually, and also on an ad-hoc basis during the rest of the year, as required. The Constitution of HealthServe has clear procedures for directors' conduct where a potential conflict of interest may arise.

2. Skills Set and Diversity

The Directors are individuals with leadership experiences in businesses, philanthropy, academia, pastoral field and professional practices. The Board collectively has a broad diversity of expertise and experience including, but not limited to, accounting, finance, fundraising, legal, medical and business management. There is also gender diversity on the Board. With the completion of the recent Board renewal in FY 2021, five out of the 10 directors (including the Chairperson) are female. Detailed information on each of the Directors are set out in pages 08 – 09 of this report.

BOARD RENEWAL (SELECTION AND RECRUITMENT)

Each Director is appointed for a term of three years. The Nominating and Human Resource Committee is tasked with identifying and nominating suitable candidates for directorship or Board committee memberships according to the needs of the organisation.

The Board is conscious of the need for Board renewal from time to time and has been working on this continually and systematically to ensure that transition is smooth and without disruption. There is no Board member who has served on the Board for more than 10 years.

In FY 2021, we completed our well-planned Board renewal process with the retirement of Mr Chan Kum Kit and Mr Matthew Saw who have both served on the Board for more than eight years, on 31 December 2021. The Board expresses its heartfelt thanks to Kum Kit and Matthew for their services and contributions to HealthServe. The Board also welcomed a new member, Mr Eugene Seow, with effect from 31 December 2021.

*Excluding Mr Eugene Seow, who joined the Board of Directors on 31 Dec 2021

BOARD PERFORMANCE

1. Induction of New Directors

HealthServe has in place a comprehensive induction and orientation programme for all new Board members.

2. Continuing Training

Board members are also encouraged to undergo continual training as directors through the various courses and webinars that are conducted by NCSS, NVPC, MCCY, Singapore Institute of Directors and other relevant organisations. In FY 2021, five out of the 10 directors (including the Chairperson) completed a 14-hour Crisis Helpline training jointly provided by HealthServe and the Samaritans of Singapore.

3. Code of Conduct

HealthServe has implemented a Code of Conduct for its Board members which is strictly adhered to by all Directors and Board Committee members who are not Board members.

4. Strategic Planning

The Board holds strategic planning sessions regularly with Management to review and set strategic directions for the organisation, to ensure that HealthServe's programmes, services and activities are in line with its objectives. There was a strategic review session completed in 2021.

5. Reserved Matters

In the various policies that are in place and in the constitution of HealthServe, there are critical matters that cannot be undertaken by Management without the approval of the Board. These include undertaking obligations above certain financial thresholds, undertaking new businesses and critical communications on behalf of HealthServe.

6. Board Evaluation

The Board has in place a Self Evaluation process which is led by the Chairman. Conducted on an annual basis, the exercise serves to assess the Board's performance and effectiveness, from its composition to procedures and accountability. All Board members completed the exercise in 2021.

7. Directors' Attendance at Board and Board Committee Meetings

There are at least four Board meetings a year (once a quarter) and ad hoc meetings are held from time to time when the need arises. Board meetings were well attended and there is a 100% attendance for all Board meetings in FY 2021. Board Committee meetings are held in accordance with the Terms of Reference of each Committee. Each

Director sits on at least one of the Board Committees and actively participates in all Board meetings. Information on the participation of Board members in the various Committees are set out in pages 77 – 79 of this report. Directors who are unable to attend meetings in person are able to participate through video/audio/tele-conferencing.

Board Meeting Attendance

Directors	Number of Meetings	Attendance
Chan Chia Lin	5	5
Dr Jeremy Lim Fung Yen	5	5
Chan Kum Kit	5	5
Dr Calvin Chong Peng Choon	5	5
Dr Chan Lai Gwen	5	5
Serene Chee	5	5
Choy Peng Wah	5	5
Gail Lien	5	5
Susan Kong Yim Pui	5	5
Matthew Saw Seang Kuan	5	5

Board Sub-Committee Meeting Attendance

Audit Committee		
Directors	Number of Meetings	Attendance
Susan Kong	4	4
Lee Yuit Chieng	4	4
Choy Peng Wah	4	4

Finance Committee		
Directors	Number of Meetings	Attendance
Chan Kum Kit	4	4
Serene Chee	4	4
Gail Lien	4	4

Fundraising and Engagement Committee		
Directors	Number of Meetings	Attendance
Choy Peng Wah	2	2
Serene Chee	2	2
Darren Tay	2	2
Gopi Mirchandani	2	1
Chandrima Das	2	1

Nominating and Human Resource Committee		
Directors	Number of Meetings	Attendance
Chan Chia Lin	2	2
Dr Jeremy Lim	2	2
Janelle Tan	2	2
Janet Koh	2	2

Medical Services Committee		
Directors	Number of Meetings	Attendance
Dr Jeremy Lim	1	1
Dr Gan Wee Hoe	1	1
Dr Tan Thong Kwan, Benjamin	1	1
Dr Yeo Cheng Hsun Jonathan	1	1
Dr Shawn Vasoo	1	1
Dr Yoong Su-Yin, Joanne	1	1

Services Committee		
Directors	Number of Meetings	Attendance
Dr Calvin Chong	4	4
Gail Lien	4	4
Matthew Saw	4	4
Long Chey May	4	4

Mental Health Advisory Panel		
Directors	Number of Meetings	Attendance
Dr Jeremy Lim	1	1
Dr Chan Lai Gwen	1	1
Dr Donna Lim	1	1
Mok Yee Ming	1	1
Mythily Subramaniam	1	1

8. *Delegation By Board*

To assist the Board in the detailed consideration and provide more targeted oversight of various aspects of the operations of the organisation, and to facilitate more efficient decision making, seven Board committees were formed namely, the Finance Committee ("FC"), the Audit Committee ("AC"), the Nominating and Human Resource Committee ("NHRC"), the Medical Services Committee ("MSC"), the Services Committee ("SC"), the Fundraising and Engagement Committee ("FEC"), and the Mental Health Advisory Panel ("MHAP").

Each of the Committees is chaired by a Board member and includes other Board members and co-opted members who have the relevant expertise in the matters covered by the respective Committees. The appointment of Board Committee members is approved by the Board. The Board is governed by its own Terms of Reference. Each Committee has a clear set of Terms of Reference which has been approved by the Board. These are set out on pages 84 – 92 of this report.

Although the Board Committees are empowered to make their own decisions, the Board is ultimately responsible for all decisions made by the Board Committees.

FINANCE COMMITTEE

A key aspect of the financial governance of HealthServe lies in the work of the Finance Committee which has oversight of all financial matters of the organisation including budget planning and monitoring, financial reporting and disclosure and financial management and controls. The Finance Committee also provides guidance to both the Board and the management team on the finance policies to ensure appropriate operational and accounting practices are established.

AUDIT COMMITTEE

The Audit Committee assists the Board in providing oversight of HealthServe's financial and risk governance by:

- i. Ensuring there is a Risk Management Framework in place and having oversight on the Company's compliance with the framework.
- ii. Working with external auditors to identify potential concerns in HealthServe's statutory audit and internal controls; and report any irregularities and concerns to the Board. In this regard, the Audit Committee meets with the external auditors at least once a year without the presence of Management.
- iii. Ensuring that reviews are conducted regularly on the Company's internal controls.

RISK MANAGEMENT AND INTERNAL CONTROLS

Review of Internal Controls

To further strengthen governance as part of its regular review of internal controls, HealthServe had engaged external consultants to review and refine its written policies and Standard Operating Procedures (SOPs) to ensure the incorporation of updated best practices. This internal review project has been largely completed in 2021 with a small component being completed in April 2022. Following the refinement of policies and SOPs based on the recommendations, the management team will continue to monitor and evaluate the workings of these policies and SOPs.

Risk Management

Under the Risk Management Framework approved by the Audit Committee, the management team identifies key risks and their respective ownership (at executive and functional levels) and presents them annually to the Audit Committee and the Board. As part of the risk management process, all operating units are required to monitor and refresh their risk inventories, conduct risk prioritisation exercises, identify key and emerging risks and develop the requisite risk controls and risk treatment action plans. This is undertaken and reviewed continually and reported to the Audit Committee and the Board on a quarterly basis. In 2021, most of the risk incidents identified have been satisfactorily resolved with appropriate mitigation actions..

ADDITIONAL MEASURES TO ENHANCE CORPORATE GOVERNANCE

HealthServe has put in place various additional measures to enhance governance, and below are some of the highlights:

Finance Policy and Procedures

The Finance Committee works with the management team to ensure compliance with the

organisation's financial policies and procedures.

The Finance Committee reviews:

- i. The annual budget with the board chairman before it is submitted to the board for approval
- ii. The monthly and quarterly financial reports to monitor actual spending against budget
- iii. The annual financial statements prepared by appointed external auditors
- iv. And recommends investments for the board's approval

The Finance Policy which has been approved by the Board sets out:

- i. A clear approval matrix for procurement and payments
- ii. Budgeting guidelines for annual projected income and expenditure
- iii. Guidelines for investments of cash and reserves
- iv. Policies for anti-money laundering and anti-terrorism financing
- v. Accounting guidelines for donations and donations-in-kind
- vi. Income and receipt management guidelines

HealthServe has strict documented procedures and protocols to account for all incoming monies and donations; and effectively monitors the prudent utilisation of these resources.

Reserves Policy

The reserves that HealthServe has set aside provide financial stability and the means for the development of the organisation's work. In FY 2021, HealthServe met its reserves policy target of a minimum of two years of operating expenditure.

HealthServe has accounts with the following financial institutions: CIMB Bank Berhad, DBS, Fullerton Fund Management, HL Bank, SCB and UOB. Besides the auditor Lo Hock Ling & Co., HealthServe has no bankers, lawyers, other auditors, investment advisers or any other advisers.

Conflict of Interest Policy

There is a clear Conflict of Interest Policy that mandates that no staff or Board Director may engage in any external interest or business that may undermine or conflict with the organisation's overall welfare. Annual declaration of interests by Board members, members of key management personnel, and all staff personnel is required in writing. When a situation arises where there is a conflict of interest, the Director or staff shall abstain from participating in the discussion, decision making and voting on the matter. The charity does not have any paid staff who is a close member of the family belonging to the Executive Head or a governing board member of the charity during the financial year.

Whistleblowing Policy

HealthServe promotes an open and transparent culture and is committed to the highest standards of integrity and professional conduct. HealthServe's whistleblowing policy aims to provide an avenue for employees and external parties to raise concerns relating to any aspect of the organisation's operations, including potential breaches of the Code of Conduct by employees. HealthServe treats such reports with strict confidentiality. The policy also serves to protect employees from any potential negative consequences for reporting their concerns. Should any party come across possible corporate or employee improprieties, they are encouraged to write in to whistleblow@healthserve.org.sg immediately and in good faith.

Privacy Policy

As HealthServe's principal activity is the provision of medical services to its beneficiaries, it is crucial that the privacy of its beneficiaries' personal data is safeguarded. HealthServe is committed to treating all essential personal data collected with strict confidentiality and to ensuring that it is protected and managed in accordance with relevant data protection laws of Singapore, international good practices and individuals' rights. Since 2014, HealthServe has complied with requirements listed under the Personal Data Protection Act, with the appointment of Data Protection Officers who are supported by a Data Protection Team. In FY 2021, HealthServe appointed an external consultant to conduct a thorough review, assessment and update of the PDPA policy. The review found no breaches and the recommendations have been updated in its PDPA Policy. All employees undergo an annual online training and assessment programme created by Personal Data Protection Commission (PDPC) of Singapore, and all members of the Data Protection Team had also completed the Fundamentals in Personal Data Protection (2020) course. Reviews and assessments continue to be undertaken on a regular basis.

Fundraising Practices

HealthServe's main source of financial support is donations from foundations, churches and corporations as well as individual donors. The organisation is committed to ensuring that all fundraising activities are carried out ethically and are in line with Singapore's fundraising laws. Its Donor and Fundraising policy sets out the organisation's position, principles and practices on fundraising and data transparency, ensuring accountability to all stakeholders including the public. The Fundraising and Engagement Committee has oversight of all fundraising matters and provides guidance to both the Board and the management team on the policy to ensure appropriate operational and accounting practices are established.

Programme Management

The key activities of HealthServe in the provision of medical services and mental health services to its beneficiaries demand a high level of specialist advice and guidance in the structuring, organisation and operation of these services. In this regard, Management has the guidance of a panel of highly qualified professionals in the Medical Services Committee as well as the Mental Health Advisory Panel (MHAP). Tasked to promote the development of clinical practice standards and benchmarking in the domains of mental health and assessment of psychosocial needs, the MHAP continues to guide the Board and the management team in reviewing related programmes, services and research in HealthServe.

Code Of Conduct For Staff And Volunteers

HealthServe's operations and services are supported by a lean core team and hundreds of volunteers every year. A key aspect of HealthServe's work lies in ensuring effective volunteer management and governance. Prior to engaging beneficiaries, all staff and volunteers of HealthServe are required to undergo onboarding and relevant training, and also agree and adhere to a Code of Conduct which sets out the principles, values and behaviours expected of them. In FY 2021, there were 10 new staff members onboarded who received orientation which included a briefing of the Code of Conduct. The Code of Conduct is made available online to all staff and volunteers. It is regularly reviewed and managed by HealthServe's management team.

Public Image

The public image and reputation of an Institution of a Public Character is critical to reflect the values and integrity of the organisation, in order to instill confidence and peace of mind amongst its stakeholders. Aimed at safeguarding HealthServe's brand and reputation, HealthServe has in place a Communications & Media Policy for all members, which sets out principles and guidelines related to external and internal communications. This is regularly reviewed and enhanced to ensure the policy's relevance in line with the evolving media landscape.

REMUNERATION DECLARATIONS

The charity discloses that during FY 2021, there were three staff whose annual remuneration was within the band of \$100,000 and \$200,000; there was no staff whose annual remuneration exceeds \$200,000. In FY 2021, there were no paid staff who is a close member of the family of the executive head or board members. The process for setting remuneration of key staff is determined by the NHRC and approved by the Board. No staff is involved in setting their own remuneration.

TERMS OF REFERENCE: THE BOARD

1. Introduction

- 1.1 To determine the vision and mission of HealthServe and to oversee the effective functioning and governance of the organisation. The organisation is grounded on Christian values and seeks to give practical expression to the healing ministry of Christ.

2. Principal Responsibilities

- 2.1 To determine and periodically review HealthServe's vision and mission.
- 2.2 To regularly review and approve strategic work plans and their outcomes relating to services provided by HealthServe, taking into account the landscape and needs of the migrant worker sector.
- 2.3 To ensure that there is sound management of HealthServe's finances.
- 2.4 To ensure that HealthServe is properly resourced and organized.
- 2.5 To ensure that there are systems, procedures and appropriate checks and balance in place to ensure that HealthServe operates in compliance with governing laws and regulations.
- 2.6 To approve the annual budget and workplan for HealthServe.
- 2.7 To approve policies governing the operations of HealthServe's work.
- 2.8 To delegate the day to day running of HealthServe to the Executive Director, who shall be assisted by the management team.
- 2.9 To oversee the performance evaluation of the Executive Director and the management team and to ensure succession planning of the Board, the Executive Director and the management team.
- 2.10 To constitute board committees which it deems necessarily for the different areas of HealthServe's work. The Board shall ensure that all Board Committees have documented terms of reference in place to oversee their areas of governance and operations.

3. Composition

- 3.1 The Board shall comprise at least 5 members, who have diversified and relevant skill sets for the proper governance of HealthServe.
- 3.2 The members of the Board shall be appointed for a term of three years. The terms of all Board members should be staggered so that approximately one third of the Board members shall retire from office each year. Board members may be reappointed with the approval of the Board.
- 3.3 A Board member may serve for a maximum of three consecutive terms, in line with the 10-year limit laid out in the Charity Council's Code of Governance. There should be strong reasons for the extension of a board member's service beyond 10 years, and the extension has to be approved by the Board.

4. Board Meetings

- 4.1 The Board shall meet at least four times a year. Any Board director can convene a meeting by serving at least 14 days' notice on HealthServe through its secretary and every member of the Board.
- 4.2 The quorum at a meeting of the Board shall be 50% of Board members.
- 4.3 Decisions of the Board shall be made by consensus, where possible. Failing such consensus, issues shall be decided by a majority of votes cast by the Board members present, with the Chairperson of the Board having the casting vote in the event of equality of votes.
- 4.4 In consultation with the Chairperson of the Board, the Board Secretary shall be responsible for circulating the agenda and papers to all Board members, ideally at least a week before a meeting.
- 4.5 Proceedings and decisions of the Board meetings should be recorded and the minutes circulated to all Board members as soon as practicable.
- 4.6 The Board minutes shall be presented for approval at each subsequent Board meeting.
- 4.7 A resolution in writing signed by at least half of the members of the Board for the time being shall be as effective as a resolution passed at a meeting of the Board duly convened and held, and may consist of several documents in the like form each signed by one or more of the Board members.
- 4.8 Matters approved by the Board by circulation should be recorded and tabled at the next Board meeting for information.

TERMS OF REFERENCE: AUDIT COMMITTEE

1. Introduction

The Audit Committee (AC) shall be a committee established by the Board of Directors (Board) that is amenable to the Board.

2. Role and Responsibilities of the AC

2.1 Overseeing financial reporting

- (a) Review the financial reporting and disclosure process and monitor the choice of accounting policies and principles.
- (b) Meet with the internal auditors and the external auditors, in each case, without the presence of Management, at least annually.
- (c) Assess the accuracy, completeness, and consistency of financial information (including interim reports) before submission to the Board for approval.

2.2 Overseeing external audit processes

- (a) In connection with the terms of engagement to the external auditors, make recommendations to the Board on selection, appointment, re-appointment, removal and resignation of the external auditors, and the audit fees, having regard to the independence and objectivity of the external auditors annually.
- (b) To review audit plans and reports of external auditors and internal auditors (where relevant) and consider the effectiveness of the actions taken by management on the auditor's recommendations.
- (c) Assess and discuss with the external auditors to provide assurance of reliability of financial reporting, safeguarding of assets and compliance with relevant laws and regulations.

2.3 Internal Control and Internal Audit

To consider and review Company's system of internal control, including operational, compliance controls, business and financial risks management policies and systems, and to ensure that a review of the effectiveness of the same is conducted periodically as may be appropriate.

2.4 Enterprise Risk Management

- (a) To review and approve the Company's risk management framework and ensure that management has put in place mechanisms and/or undertaken approach to ensure that risks associated with the key processes of the Company are adequately identified and addressed.
- (b) To oversee periodic reviews to be conducted by management of key processes to ensure compliance with the established procedures, and to report to the Board on the findings and recommendations for improvements, where necessary.
- (c) To make recommendations to the Board on areas of improvement and ensure that periodic reports are made to the Board by the management on its risk management action plans.
- (d) Oversight of regulatory compliance.

2.5 Fraud/ Irregularity/ Investigation

- (a) To review and discuss with the external auditors, any suspected fraud or irregularity, or suspected infringement of any law, rules or regulations, which has or is likely to have a material impact on the Company's operating results or financial position, and Management's response.
- (b) To review whistleblowing policy and ensure that a channel is established by which staff of the Company may, in confidence, raise concerns about possible improprieties in matters of financial reporting or other matters and ensure that formal procedures are in place for the independent investigations of such matters and for appropriate follow up actions.

2.6 Other Matters

- (a) To undertake such other reviews and projects as may be requested by the Board.
- (b) To undertake such other functions and duties as may be required by statute and by such amendments made thereto from time to time.

3. Composition

- 3.1 The AC shall comprise not less than three members appointed by the Board, including the Chairperson who shall be a Board member, provided that the Treasurer or the Finance Committee chairperson shall not concurrently chair the AC.
- 3.2 The AC may co-opt additional members who shall be persons with special knowledge or background which will aid in the work of the AC provided that the number of co-opted members shall not exceed the number of members appointed by the Board.
- 3.3 Members of the Committee shall be appointed for a period of three (3) years; except that where a Member is a Board Director, his term of appointment shall be co-terminus with his term on the Board.
- 3.4 The appointment of members may be renewed upon expiry of the period of (3) years.

4. Administration

4.1 Meetings

- (a) Meetings shall be held at least two (2) times a year. Additional meetings may be convened when necessary.
- (b) The external auditors may request a meeting if they consider that a meeting is necessary.
- (c) The Committee shall have full discretion to invite any Director or Management to attend its meetings.
- (d) A staff from the Company shall be the Secretary of the Committee.
- (e) The Secretary of the Committee shall attend all meetings and minute the proceedings thereof.
- (f) The minutes shall be circulated to other members of the Board, who are not the members of the Committee, at the next Board meeting following the confirmation of such minutes.
- (g) Attendance at meetings may be through participation on a conference call or teleconference or other electronic or digital media.
- (h) All minutes of Board Committee Meetings shall be circulated to the Board for information.

4.2 Quorum

The quorum shall be 2 members at least one of which is a member of the Board of Directors.

4.3 Voting

Each member present shall have one vote. All resolutions passed in the meeting shall be by majority of votes. In the event of an equality of votes, the Chairman shall not have a casting vote. Any member who has an interest in any matters being reviewed or considered by the Committee shall abstain from voting on the matter.

4.4 Resolution and Meetings

A resolution approved via letter, email or facsimile by a majority of the Committee shall be as valid and effectual for all purposes as if it had been passed at a meeting of the Committee duly convened, held and constituted. Any such resolution may be contained in a single document or may consist of several documents all in like form signed by one or more members.

5. Reporting Responsibilities

- 5.1 The AC shall report at least half yearly to the Board on the exercise of its duties, and on the outcome of its reviews and discussions with the external auditors and its findings on any suspected fraud or irregularity, or suspected infringement of any Singapore law, rules or regulations, which has or is likely to have a material impact on the operating results or financial position of the Company as well as identifying those matters which it considers require action or improvement, and making recommendations as to the step to be taken. In respect of any specific investigation undertaken by or at the instructions of the AC, of allegations of fraud, illegality or misconduct, the AC shall report its findings to the Board, as soon as practicable after such findings.

- 5.2 In respect of any specific investigation undertaken by or at the instructions of the AC, of allegations of fraud, illegality or misconduct, the AC shall report its findings to the Board, as soon as practicable after such findings.

6. General

- 6.1 The AC in carrying out its tasks under these Terms of Reference may obtain at the Company's expense such external or other independent professional advice as it considers necessary to carry out its duties.
- 6.2 All discussions and decisions are private and confidential. Members may not disclose any material, information or discussions with any party other than the Board members and relevant staff (on a need to know basis) without the written permission of the Board.

Any member of the AC may initiate amendments to the Terms of Reference when the need arises due to changes in the relevant rules or when there are changes in the Company's structure, organisation and/or operations which affect the matters set out in the Terms of Reference. In any event, at least once every four years, the AC shall review its Terms of Reference to ensure that it meets the needs of the Company and is consistent with the prevailing regulatory environment.
- 6.3 Amendments to the Terms of Reference shall be approved by the AC and tabled at a Board meeting for approval.
- 6.4 All Board Committee Meetings shall be circulated to the Board for information.

TERMS OF REFERENCE: FINANCE COMMITTEE

1. Role

To assist the Board of Directors to oversee the financial affairs of HealthServe.

2. Principal Responsibilities

- 2.1 Review the annual budget, help ensure consistency between the budget and the organisation's strategic plans and make recommendation to the Board for approval.
- 2.2 Review HealthServe's revenue and expenditure, balance sheet, cash flow, investments and other matters related to its continued solvency.
- 2.3 Ensure regular and accurate monitoring, reporting and accountability for funds, obtain explanations from staff for any material variances between budget and actual performance and report to the Board on any financial irregularities and concerns.
- 2.4 Recommend financial guidelines to the Board, for example on HealthServe's reserves policy.
- 2.5 Approve fund-raising targets and plans, working in conjunction with staff and the Fund Raising Subcommittee.

3. Composition

- 3.1 The Committee shall consist of a minimum of three members, at least one of whom shall be a Board member.
- 3.2 The Chairman of the Committee shall be a Board member.
- 3.3 Members of the Committee shall be independent and be appointed for a period of three (3) years; except that where a Member is a Board Director his appointment term shall be co-terminus with the term of his Board Director term of office.
- 3.4 The appointment of members may be renewed upon expiry of the period of (3) years.

4. Meetings

- 4.1 Meetings shall be held at least twice a year.
- 4.2 The Finance Manager shall be required to attend all meetings of the Committee.
- 4.3 A staff of HealthServe shall be Secretary of the Finance.
- 4.4 The Secretary shall attend all meetings and minute the proceedings thereof.

- 4.5 Each member present shall have one vote. All resolutions passed in the meeting shall be by majority of votes. In the event of an equality of votes, the Chairman shall not have a casting vote. Any member who has an interest in any matters being reviewed or considered by the Committee shall abstain from voting on the matter.
 - 4.6 Minutes of all meetings shall be confirmed by the Chairman of the meeting and circulated to all the Members of the Committee.
 - 4.7 All Board Committee Meetings shall be circulated to the Board for information.
- 5. Quorum**
- The quorum shall be 50% of the members or two members, whichever is higher, with at least one member who shall be a Board Director.

TERMS OF REFERENCE: FUNDRAISING AND ENGAGEMENT COMMITTEE

- 1. Role**

Responsible for HealthServe's fundraising and engagement initiatives.
- 2. Principal Responsibilities**
 - 2.1 To develop and implement a fundraising strategy in accordance with the strategic objective of the Board and relevant sub-committees (e.g. Finance Committee). This includes but is not limited to:
 - (a) Working with Healthserve staff and volunteers to raise funds.
 - (b) Identifying and soliciting funds from external sources.
 - (c) Organizing major fundraising initiatives and events, e.g. gala dinners, and private fundraising events such as golf tournaments, charity screenings.
 - (d) Monitoring fundraising efforts to ensure that they comply with relevant regulations and are cost-effective.
 - 2.2 To develop and implement a consistent and sustainable engagement strategy to target donors, volunteers and the public. This includes but is not limited to:
 - (a) Working with Healthserve staff and volunteers to develop suitable outreach e.g. media campaign.
 - (b) Engagement with donors and volunteers and ensuring proper acknowledgement of the same.
 - (c) Forging effective public relations with relevant stakeholders such as the media.
- 3. Composition**
 - 3.1 The Committee shall consist of a minimum of three members, at least one of whom shall be a Board member.
 - 3.2 The Chairman of the Committee should be a Board member.
 - 3.3 All members of the Subcommittee shall be appointed for a period of three (3) years; except that where a Member is a Board Director his appointment term shall be co-terminus with the term of his Board Director term of office.
 - 3.4 The appointment of members may be renewed upon expiry of the period of (3) years.
- 4. Meetings**
 - 4.1 Meetings shall be held at least twice a year.
 - 4.2 A staff of HealthServe shall be Secretary of the Company.
 - 4.3 The Secretary shall keep Minutes of all meetings.
 - 4.4 Minutes of the meetings shall be confirmed by the Chairman of the meeting and circulated to all the Members of the Committee.
 - 4.5 The quorum for such meetings shall be 50% of the members or two members, whichever is higher, with at least one member who shall be a Board Director.
 - 4.6 All minutes of Board Committee meetings shall be circulated to the Board for information.

TERMS OF REFERENCE: NOMINATING AND HUMAN RESOURCE COMMITTEE

- 1. Role**

To assist the Board to oversee the Board and Board committee composition and appointments, senior executive appointments and performance appraisal and establish the human resource strategy, policies and procedures of HealthServe.
- 2. Principal Responsibilities**
 - 2.1 **Board, Board Committees and Advisory Panels**
 - (a) Review and make recommendations to the Board on the composition of the Board to ensure an appropriate balance of expertise, skills, attributes and ability among the Board members.
 - (b) Identify potential Board member candidates and ascertain their interest and availability for Board services.
 - (c) Nominate individuals to the Board for approval as members of the Board.
 - (d) Succession planning.
 - (e) Recommend and oversee Board Committees and Advisory Panels and their composition.
 - (f) Recommend the Code of conduct for Board, Board Committee and Advisory Panel Members.
 - 2.2 **Human Resource**
 - (a) Review and make recommendations to the Board on the:
 - (b) Staffing needs of the organization.
 - (c) Performance evaluation framework.
 - (d) Compensation and benefits structure.
 - (e) Annual salary increments and bonus range.
 - (f) Career development and training strategy.
 - (g) Code of conduct for employees.
 - 2.1 Provide direction to the Executive Director in his human resource management when needed.
 - 2.2 Assist in appraising the performance of the Executive Director and review and recommend his/her compensation, benefits and development.
 - 2.3 Oversee performance review, career development and compensation of the Senior Management team.
- 3. Composition**
 - 3.1 The Committee shall comprise a minimum of three members, at least one of whom shall be a Board member.
 - 3.2 The Chairman of the Committee should be the Board Chairman.
 - 3.3 Members of the Committee shall be independent and be appointed for a period of three (3) years; except that where a Member is a Board Director, his term of appointment shall be co-terminus with his term on the Board.
 - 3.4 The appointment of members may be renewed upon expiry of the period of (3) years.
- 4. Meetings**
 - 4.1 Meetings shall be held at least twice a year. The meetings may be virtual or in person.
 - 4.2 Each member present shall have one vote. All resolutions passed at the meeting shall be by majority of votes. In the event of an equality of votes, the Chairman shall have a casting vote. Any member who has an interest in any matters being reviewed or considered by the Committee shall abstain from voting on the matter.
 - 4.3 A staff of HealthServe shall be Secretary of the HR Committee.
 - 4.4 The Secretary shall keep the minutes of all meetings of the Committee.

- 4.5 Minutes of all meetings shall be confirmed by the Chairman of the meeting and circulated to all the Members of the Committee.
- 4.6 The quorum shall be 50% of the members or two members, whichever is higher, with at least one member who shall be a Board Director.
- 4.7 All minutes of Board Committee minutes shall be circulated to the Board for information.

TERMS OF REFERENCE: MEDICAL SERVICES COMMITTEE

1. Introduction

The Medical Services Committee shall be a committee established by the Board of Directors (Board) amenable to the Board.

This committee has oversight of Quality Assurance in HealthServe. It is established in accordance with the requirements of Section 11 of the Private Hospital and Medical Clinics Act (Cap 248). All documents arising from this Committee are authorized by the Chairman SC (Med) under the PHMC Act Section 11 (subsection 5) and 16 and cannot be disclosed without the Chairman's explicit permission.

2. Roles and responsibilities

- 2.1 Responsible for quality assurance of the medical services provided by HealthServe. This function is a requirement set by Ministry of Health.
- 2.2 Promote development of clinical practice standards and benchmarking.
- 2.3 Periodic review of patient care statistics, medical (drug and equipment) expenses and clinical audits.
- 2.4 Review of new clinical programmes and services prior to implementation, and regular monitoring of outcomes thereafter.
- 2.5 Review of clinical manpower establishment and salaries as necessary and provide feedback to HR Subcommittee and Board.
- 2.6 Advise on annual training budget, and on suitability of training courses and conferences for staff professional development.
- 2.7 Oversee research (operational, clinical, and social/behavioural science): review research proposals, monitor research activity. Ethics review, if required, is conducted by collaborating.

3. Composition

- 3.1 The Committee shall comprise a minimum of three members, at least one of whom shall be a Board member.
- 3.2 The Chairman of the Committee should be a Board Director.
- 3.3 Members of the Committee shall be independent and be appointed for a period of three (3) years; except that where a Member is a Board Director, his term of appointment shall be co-terminus with his term on the Board.
- 3.4 The appointment of members may be renewed upon expiry of the period of (3) years.

4. Meetings

- 4.1 Meetings shall be held at least twice a year. The meetings may be virtual or in person.
- 4.2 Each member present shall have one vote. All resolutions passed at the meeting shall be by majority of votes. In the event of an equality of votes, the Chairman shall have a casting vote. Any member who has an interest in any matters being reviewed or considered by the Committee shall abstain from voting on the matter.
- 4.3 A staff from HealthServe shall be the Secretary of the Medical Services Committee.
- 4.4 The Secretary shall keep the minutes of all meetings of the Committee.
- 4.5 Minutes of all meetings shall be confirmed by the Chairman of the meeting and circulated to all the Members of the Committee.

- 4.6 The quorum shall be 50% of the members or two members, whichever is higher, with at least one member who shall be a Board Director.
- 4.7 All minutes of Board Committee meetings shall be circulated to the Board for information.

TERMS OF REFERENCE: SERVICES COMMITTEE

1. Role

To assist the HealthServe Board to oversee the non-medical services and migrant engagement activity of HealthServe.

2. Primary Responsibilities

- 2.1 Responsible for overseeing the quality and ethical standards of non-medical services, including casework, social assistance, and outreach services provided by HealthServe.
- 2.2 Promote development of casework practice standards and benchmarking.
- 2.3 Periodic review of operational processes for non-medical services, including casework, social assistance, and outreach programmes.
- 2.4 Periodic risk mitigation reviews for non-medical services, including casework, social assistance, and outreach programmes.
- 2.5 Review of new casework programmes prior to implementation, and regular monitoring of outcomes thereafter.
- 2.6 Review of migrant engagement and outreach programmes and services prior to implementation, and regular monitoring of outcomes thereafter.
- 2.7 Review of casework manpower establishment and salaries as necessary, and provide feedback to HR Subcommittee and Board.
- 2.8 Advise on annual training budget, and on suitability of training courses and conferences for staff professional development of the Casework and Social Assistance team.

3. Composition

- 3.1 The Committee shall comprise a minimum of three members, at least one of whom shall be a Board member.
- 3.2 The Chairman of the Committee should be a Board member.
- 3.3 Members of the Committee shall be independent and be appointed for a period of three (3) years; except that where a Member is a Board Director, his/her term of appointment shall be co-terminus with his/her term on the Board.

4. Meetings

- 4.1 Meetings shall be held at least twice a year. The meetings may be virtual or in person.
- 4.2 Each member present shall have one vote. All resolutions passed at the meeting shall be by majority of votes. In the event of an equality of votes, the Chairman shall have a casting vote. Any member who has an interest in any matters being reviewed or considered by the Committee shall abstain from voting on the matter.
- 4.3 The Secretary of the Services Committee should be from the Casework and Social Assistance team or any such person as may be nominated by the Committee.
- 4.4 The Secretary shall keep the minutes of all meetings of the Committee.
- 4.5 Minutes of all meetings shall be confirmed by the Chairman of the meeting and circulated to all the Members of the Committee.
- 4.6 All minutes of Board Committee meetings shall be circulated to the Board for information.

5. Quorum

The quorum shall be 50% of the members or two members, whichever is higher, with at least one member who shall be a Board Director.

TERMS OF REFERENCE: MENTAL HEALTH ADVISORY PANEL

1. Role

To assist HealthServe's Board to oversee Mental Health, Counselling and related services, initiatives and research in HealthServe.

It is established in accordance with the requirements of Section 11 of the Private Hospital and Medical Clinics Act (Cap 248). All documents arising from this committee are authorized by the Chairman MAC under the PHMC Act Section 11 (subsection 5) and 16 and cannot be disclosed without the Chairman's explicit permission.

2. Principal Responsibilities

- 2.1 Promote development of clinical practice standards and benchmarking, in particular the domains of mental health and psychosocial needs.
- 2.2 Periodic review of patient care statistics, counselling notes, medical (drug and equipment) expenses and clinical audits.
- 2.3 Review of new mental health, counselling and related programmes and services prior to implementation, and regular monitoring of outcomes thereafter.
- 2.4 Review of clinical manpower establishment and salaries as necessary, and provide feedback to Nominating and HR Committee and the Board.
- 2.5 Advise on annual training budget, and on suitability of training courses and conferences for staff professional development.
- 2.6 Oversee research (operational, clinical, and social/behavioural science): review research proposals, monitor research activity. Ethics review, if required, is conducted by collaborating PIs' parent institutions. **Research Committee may be spun off at later date.*

3. Composition

- 3.1 The Panel shall comprise a minimum of 3 members.
- 3.2 Members of the Panel shall be independent and be appointed for a period of three years; except that where a member is a Board Director, his appointment term shall be co-terminus with his term on the Board.
- 3.3 The appointment of members may be renewed upon expiry of the period of (3) years.

4. Meetings

- 4.1 Meetings shall be held at least twice a year. Meetings may be virtual or in person.
- 4.2 A staff from the Company shall be the Secretary of the meeting.
- 4.3 The Secretary shall keep minutes of all meetings of the Committee.
- 4.4 Minutes of the Meetings shall be confirmed by a Board Director, Executive Director or any other Management staff at the meeting and circulated to all members of the Committee.
- 4.5 All minutes of the Mental Health Advisory Panel meetings shall be circulated to the Board for information.

Governance Evaluation Checklist Submission

for Jan to Dec 2021

S/ NO	CODE GUIDELINE	CODE ID	RESPONSE (Select whichever is applicable)	EXPLANATION (if Code guideline is not complied with)
BOARD GOVERNANCE				
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?		No	
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	The Chairman of the Finance Committee has not served more than four years in that capacity.
5	All governing board members must submit themselves for re-nomination and re-appointment , at least once every 3 years.	1.1.8	Complied	Re-appointment and re-nomination is carried out once every three years.
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	The Board conducts self-evaluation annually, and this was done in 2021.
	Is there any governing board member who has served for more than 10 consecutive years?		No	There has been a continual renewal of new board directors. The longest serving board director has not served more than 10 consecutive years.
8	There are documented terms of reference for the Board and each of its committees.	1.2.1	Complied	The Corporate Governance report documents the terms of reference for the Board and all its committees.

S/ NO	CODE GUIDELINE	CODE ID	RESPONSE (Select whichever is applicable)	EXPLANATION (If Code guideline is not complied with)
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	Declaration of potential or actual conflict of interest is completed annually, in writing, by board members and staff. All are required to make ad-hoc declarations, if any, throughout the year.
10	Governing board members do not vote or participate in decision making on matters where they have a conflict of interest.	2.4	Complied	In situations where a conflict of interest arises, the board director shall abstain from participating in the discussion, decision making and voting on the matter.
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	The Board holds strategic planning sessions regularly with Management. There was a strategic review session completed in 2021.
HUMAN RESOURCE AND VOLUNTEER ² MANAGEMENT				
12	The Board approves documented human resource policies for staff.	5.1	Complied	Policies are stated in a Human Resource Manual that is reviewed by the Nominating and HR Committee and approved by the Board.
13	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	HealthServe has implemented a Code of Conduct for board directors, board committee members, staff and volunteers.
14	There are processes for regular supervision, appraisal and professional development of staff.	5.5	Complied	Appraisal and development planning for staff is done annually between staff and their immediate supervisors. The Nominating and HR Committee assists in appraisal of the performance of the Executive Director and reviews his/her development.
	Are there volunteers serving in the charity? (skip item 15 if "No")		Yes	HealthServe had more than 600 volunteers in 2021.
15	There are volunteer management policies in place for volunteers.	5.7	Complied	HealthServe has a Volunteer Management Policy that has been approved by the Board.

S/ NO	CODE GUIDELINE	CODE ID	RESPONSE (Select whichever is applicable)	EXPLANATION (If Code guideline is not complied with)
FINANCIAL MANAGEMENT AND INTERNAL CONTROLS				
16	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	HealthServe's Finance Policy and Procedures states the parameters and processes for all income and expenditure. Specifically, all loans, donations, grants or financial assistance disbursed by HealthServe, if any, would have been approved by the Board during the annual budgeting exercise or on ad-hoc basis.
17	The Board ensures that internal controls for financial matters in key areas are in place with documented procedures .	6.1.2	Complied	These controls are documented in the Finance Policy and Procedures as well as HealthServe's Corporate Governance report. Existing operational controls are endorsed and approved by the Board.
18	The Board ensures that reviews on the charity's internal controls, processes, key programmes and events are regularly conducted.	6.1.3	Complied	The Audit Committee, which is established by the Board and is amenable to the Board, reviews HealthServe's system of internal controls and ensures that a review of the effectiveness of the same is conducted periodically as may be appropriate.
19	The Board ensures that there is a process to identify, and regularly monitor and review the charity's key risks .	6.1.4	Complied	HealthServe has implemented an enterprise risk management framework which is regularly monitored and reviewed through the Audit Committee. Findings, risk management action plans, and recommendations for improvement, where necessary, are reported to the Board.
20	The Board approves an annual budget for the charity's plans and regularly monitors the charity's expenditure.	6.2.1	Complied	HealthServe's annual budget is reviewed and approved by the Board. Monitoring of actual spending against the budget is done on monthly and quarterly basis through the Finance Committee.
	Does the charity invest its reserves (e.g. in fixed deposits)? (skip item 21 if "No")		Yes	HealthServe invests its reserves in low risk time deposits with approval from the Finance Committee, and all other investments are approved by the Board.
21	The charity has a documented investment policy approved by the Board.	6.4.3	Complied	The Finance Policy and Procedures, which is approved by the Board, details the reserve investment guidelines for HealthServe. The Board's approval is required for any proposed new bank or cash fund that are compliant with aforementioned reserve investment guidelines.

S/ NO	CODE GUIDELINE	CODE ID	RESPONSE (Select whichever is applicable)	EXPLANATION (If Code guideline is not complied with)
FUNDRAISING PRACTICES				
	Did the charity receive cash donations (solicited or unsolicited) during the financial year? (skip item 22 if "No")		Yes	HealthServe's main source of financial support are donations from foundations, churches and corporations as well as individual donors.
22	All collections received (solicited or unsolicited) are properly accounted for and promptly deposited by the charity.	7.2.2	Complied	Every donation is accounted for in HealthServe's finance record, which is maintained for at least 5 years. Cash donations are deposited promptly.
	Did the charity receive donations in kind during the financial year? (skip item 23 if "No")		Yes	Donations in kind are received for clinic, casework/outreach, fundraising or general purposes.
23	All donations in kind received are properly recorded and accounted for by the charity.	7.2.3	Complied	All donations in kind received are properly and promptly recorded. Details captured include receipt and movement of the various items.
DISCLOSURE AND TRANSPARENCY				
24	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	The information is disclosed in HealthServe's Annual Report and Corporate Governance report.
	Are governing board members remunerated for their services to the Board?		No	All governing board members do not receive any remuneration for their services as directors.
	Does the charity employ paid staff? (skip items 27, 28 and 29 if "No")		Yes	
27	No staff is involved in setting his own remuneration.	2.2	Complied	No staff is involved in setting their own remuneration. Remuneration of key staff is determined by the Nominating and HR Committee and approved by the Board.

S/ NO	CODE GUIDELINE	CODE ID	RESPONSE (Select whichever is applicable)	EXPLANATION (If Code guideline is not complied with)
DISCLOSURE AND TRANSPARENCY (CON'T)				
28	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. OR The charity discloses that none of its paid staff receives more than \$100,000 each in annual remuneration.	8.4	Complied	The annual remuneration of staff exceeding \$100,000 is disclosed in HealthServe's Annual Report. None of HealthServe's staff serves as a governing board member in HealthServe.
29	The charity discloses the number of paid staff who satisfies all of the following criteria: (a) the staff is a close member of the family ³ belonging to the Executive Head ⁴ 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 family belonging to the Executive Head or a governing board member of the charity, who has received remuneration exceeding \$50,000 during the financial year.	8.5	Complied	None of HealthServe's staff is related to or is a close member of the family of the Executive Director or a governing board director. This is disclosed in the Annual Report.
PUBLIC IMAGE				
30	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	This is documented in HealthServe's Communications Policy.

Notes:

¹ Staff: Paid or unpaid individual who is involved in the day to day operations of the charity, e.g. an Executive Director or administrative personnel.

² Volunteer: A person who willingly serves the charity without expectation of any remuneration.

³ Close member of the family: A family member belonging to the Executive Head or a governing board member of a charity –
(a) who may be expected to influence the Executive Head's or governing board member's (as the case may be) dealings with the charity; or
(b) who may be influenced by the Executive Head or governing board member (as the case may be) in the family member's dealings with the charity.

A close member of the family may include the following:

- (a) the child or spouse of the Executive Head or governing board member;
- (b) the stepchild of the Executive Head or governing board member;
- (c) the dependant of the Executive Head or governing board member.
- (d) the dependant of the Executive Head's or governing board member's spouse.

⁴ Executive Head: The most senior staff member in charge of the charity's staff.



www.healthserve.org.sg

1 Lorong 23 Geylang #01-07, Singapore 388352

+65 3157 4450

info@healthserve.org.sg

