



Bright Hill 光明山修身院

Evergreen
Home



ANNUAL REPORT 2019/20

www.bheh.org

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Our Mission & Vision

MISSION

Bright Hill Evergreen Home is a voluntary welfare home providing health care services for the aged, sick and destitute regardless of race, language or religion.

VISION

To promote and maintain holistic nursing and medical care to the residents and to discharge them to the community when appropriate.

VALUES

Elderly care with Love, Respect, Responsibility, Compassion & Integrity

Chairman's Message



COVID-19 comes with risks that impact the global healthcare industry significantly, causes uphill challenges and put Singapore's healthcare system to the test. Our residents are a vulnerable population group and the outbreak demands the home to put in place aggressive measures to protect them from the virus.

Disruptions in the delivery of vendors' services and supplies, employee availability, remote working arrangement and compliance with the various governmental measures in attempts to mitigate the virus spread have impeded our home's ability to provide quality care to our residents. However, it is also during unprecedented times like now that demonstrated the importance of having a strong governance framework within the home.

The Board and the Management team evaluated how risk management, governance and controls have to be adapted to drive positive changes. The home has to constantly review and change our way of working to better cope with the situation with the staff working harder and putting in longer hours. Having a robust risk management system in place proves invaluable. It granted the team the ability to adapt to these changes and sets an operational framework to actively increase the home's resilience.

The team is able to identify emerging risks swiftly, prioritise resources and respond appropriately. They readily adopted technology to monitor and manage compliance requirements, continuously working towards improving the residents' quality of life.

The COVID-19 outbreak caused a delay in the completion of the building of our second home. The second home provides a mix of single-bed and four-bedded room types. Complemented with the eight-bedded rooms in our existing home, we strive to meet the diverse needs of seniors as we ramp up our overall nursing home capacity. The team is motivated, highly inspired and is looking forward to be able to serve more elderly when the new home admits its first resident.

During this difficult period, we really appreciate all the support and help given to us by the various governing authorities, volunteers and donors, without which it would have been even tougher for us to sail through these taxing times. We are always grateful and thankful for your generous and unyielding support.

We are grateful to our staff for rising to the challenge, labouring tirelessly to do more and better for our residents, keeping them safe and healthy. Because of the camaraderie the team shared, the value of cohesive culture is clearly displayed across the home.

I wish all of you the best for the coming year. Stay Safe, Stay Healthy!

Bhikkhu Sik Kwang Sheng

Chairman

(Appointed 7 July 2006)

Chief Executive Officer's Message



2019/2020 is an extremely busy year for our home. Before the COVID-19 Pandemic outbreak, the team was working relentlessly alongside MOH, the appointed professionals and contractors to meet the tight construction timeline of our second home. When COVID-19 hit Singapore, all resources were put into ensuring that the residents and staff of the home are kept safe and healthy.

Aiming to resume business as usual in a world of social distancing, the home rolled out initiatives that centered on technology innovation. Residents are kept isolated and connected at the same time, participating in virtual volunteering activities and having remote sessions with their families.

Despite having to adjust and adapt to the changes in the way we work, the home did not put capability building on hold. We see the need and importance in continuing our journey of improvement to deliver value-added and quality services to our

residents. Putting employee safety first, we adapted the programs and established virtual live learning. Training is focused on ensuring that the team is geared up to be ready to provide quality care service to the residents of our second home.

Guided by Person-Centered Care principles, the home is designed to prioritize our residents' needs in every decision and to create a more dementia friendly care home environment. It is planned having persons with impaired thinking skills in mind and to help maintain their abilities. Essential prompts are set up to encourage independence and engagement while at the same time reducing risks.

Taking the perspective of the person, respecting and preserving the individual's personhood, the home is working towards developing a model of care that is informed by a multiple disciplinary team comprising of representatives from all departments, including the back end support team. Elements such as knowing the person, integrating the person's goals in care planning and updating care plans as individuals' needs or preferences change are the fundamentals for consideration in designing the model that aims to improve the quality of life for persons with dementia.

We are pleased to share that Bright Hill Evergreen Home has won the Charity Transparency Award 2019 under the Medium Charities Category. Winning this award for two consecutive years is an affirmation of our home's high standard of governance practices. The Board and the Management understand that while it is important to provide quality care to our residents, the responsibility to maintain a high standard of corporate governance compliance for effective performance of the home cannot be undermined.

Battling COVID-19 Pandemic is a marathon. Our team will remain cautious and vigilant to ensure that our residents stay safe and healthy. Best Wishes to all and take care!

Cheng Siok Khoong

Chief Executive Officer
(Appointed 1 August 2015)

Registration and Licences

Registration

Bright Hill Evergreen Home is registered with the Registry of Societies in accordance with the Societies Act Chapter 311 on 24 May 1982

Licence

Our Home is currently operating under Licence No. 4800352/06/192 with a two year validity period from 27th February 2019 to 26th February 2021. This licence is issued by The Director Of Medical Services, Ministry of Health in accordance to the Private Hospitals & Medical Clinics Act 1980 (Chapter 248). It allows the Home to operate a 248-bedded nursing home at 100 Punggol Field Singapore 828811.

Institutions of a Public Character (IPC) Status

Our Home has been granted IPC status under the National Council of Social Service Central Fund Scheme since 15 June 1993. Donors will be able to claim tax relief from their assessable income based on the amount donated, at prevailing deduction rate.

Affiliation

Bright Hill Evergreen Home is a full member of the National Council of Social Service from 15 June 1993 ref. SCSS/04.01.47

Charity Status at a Glance

Unique Entity Number (UEN)	: S82SS0008F
Registered Address	: 100 Punggol Field, Singapore 828811
Institutions of a Public Character (IPC) Registration Number	: IPC000377
IPC Validity Date	: 1 Dec 2017 – 30 Nov 2020
Banker	: DBS Bank Ltd
Auditor	: Baker Tilly TFW LLP Public Accountants and Chartered Accountants of Singapore

Committee Members & Advisor

(Term for year 2019/2020)

Management Committee

Chairman : BHIKKHU SIK KWANG SHENG
Abbot
*(*from 30 June 2006)*
(Appointed as Chairman from 7 July 2006)

Secretary : DR KWEH SOON HAN
Lawyer
*(*from 24 July 2008)*
(Appointed as Secretary from 2 October 2015)

Treasurer : MR LIM TECK FOON, EDMUND
Retiree (Accountant)
*(*from 29 August 2016)*
(Appointed as Treasurer from 29 August 2016)

Member : MS CHAN POH SWAI @ CHAN POH SWEE
Retiree (Accountant)
*(*from 30 June 2006)*

Member : DR LAU KAH YONG
Traditional Chinese Medicine Practitioner
*(*from 24 July 2008)*

Member : MR KEK SENG SWEE, NICHOLAS
Operations Manager
*(*from 24 July 2008)*

Member : MR LEE BOON HUAT, BEN
Secretary of Religious Organisation
*(*from 24 July 2008)*

Member : MR WONG CHEE YEUNG, STEWART
Senior Manager
*(*from 12 July 2012)*

Member : MR LOKE CHAN THAI, CHARLES
Company Director
*(*from 29 August 2013)*

Member : MR YEAP SOON KEONG, DAN
Associate Director, Enterprise IT
*(*from 29 August 2013)*

Member : MR GOH SWEE KANG, JAYSON
Managing Director
*(*from 6 April 2017)*

Member : MR TAN KIM KWANG
Group HR Director
*(*from 28 June 2019)*

Executive Committee

Chairman : MR KEK SENG SWEE, NICHOLAS
Secretary : MS CHAN POH SWAI @ CHAN POH SWEE
Member : MR YEAP SOON KEONG, DAN

Finance Committee

Chairman : MR LIM TECK FOON, EDMUND
Member : MR LEE BOON HUAT, BEN

Admission Committee

Chairman : MR LOKE CHAN THAI, CHARLES
Member : DR LAU KAH YONG
Member : MR GOH SWEE KANG, JAYSON

Medifund Committee

Chairman : MS CHAN POH SWAI @ CHAN POH SWEE
Member : MS BOON WAI FONG, FLORENCE
Member : MS ANNAH LEE
Member : MS TAN WAN JUAT, ALICE
Member : MS OOI AH SUAN

Nomination Committee

Chairman : MR KEK SENG SWEE, NICHOLAS
Member : MR WONG CHEE YEUNG, STEWART

Audit Committee

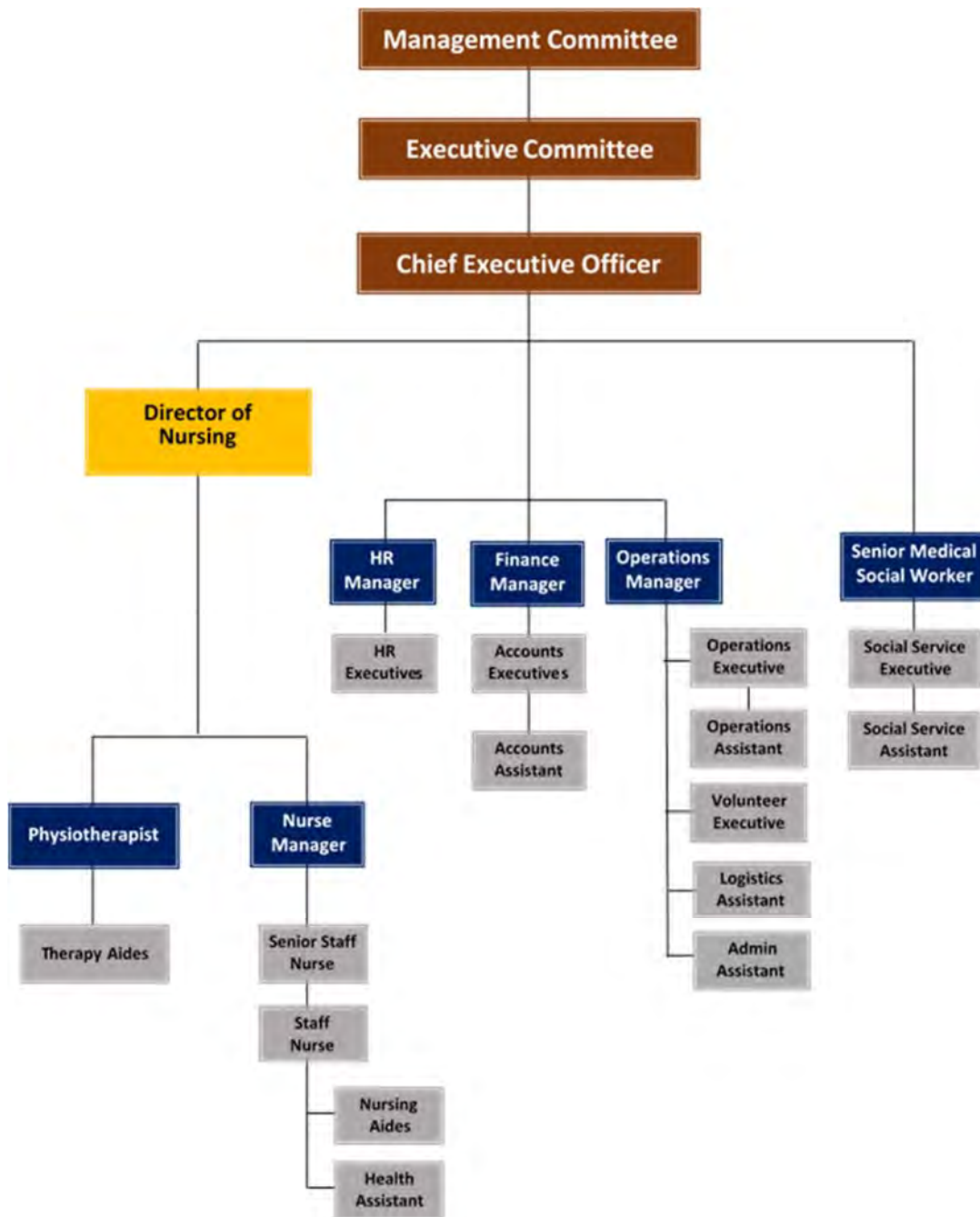
Member : MS CHAN POH SWAI @ CHAN POH SWEE
Member : MR YEAP SOON KEONG, DAN

Building Committee

Chairman : MR GOH SWEE KANG, JAYSON
Member : MR KEK SENG SWEE, NICHOLAS
Member : MR YEAP SOON KEONG, DAN

*(*Date first elected to the Committee)*

Organisation Chart



Governance

Bright Hill Evergreen Home is governed by the Constitution of the Society and is committed to adhere to practices that ensure good governance and management with specific reference to:

- Licensing & Regulatory requirements of the Ministry of Health
- Code of Governance for Charities and Institutions of Public Character

We take great effort to constantly improve on our governance and management practices. Please see Annex A for our Governance Evaluation Checklist to assess compliance with the Code of Governance for Charities and Institutions of Public Character.

Charity Transparency Award 2019

For a second consecutive year, Bright Hill Evergreen Home won the Charity Transparency Award 2019 under the Medium Charities Category.

The annual Charity Transparency Awards (CTA) was introduced in 2016 by the Charity Council. It aims to promote good governance and transparency in the charity sector by acknowledging the excellent work of charities, while inspiring others to emulate their best practices.

Our home ensures all donations are accurately accounted for and disbursed appropriately to benefit our residents. We always strive for good governance compliance, ensuring adherence to transparent and good disclosure practices.



The Board

Our Home is governed and its affairs administered by a Committee of Management of not less than 10 members, referred to as the Management Committee (MC).

MC members are elected at the annual general meeting. Members are appointed for a term of 1 year and are eligible for re-appointment or re-nomination with the exception of the Treasurer whereby there is a maximum term limit of four consecutive years. There are 6 MC members who have served more than 10 years. Their services are required as their experience contributes to the smooth and effective running of the Home. The Board has been identifying and recruiting new members equipped with competencies and skills that are aligned with the Home's strategic directions.

Reasons for retaining the 6 MC members for more than 10 consecutive years are as follows:

Name of MC Member	Reason
Bhikkhu Sik Kwang Sheng	Bhikkhu Sik Kwang Sheng is the sixth abbot of Kong Meng San Phor Kark See Monastery (KMSPKS) since 2004. He helmed KMSPKS since 1995 as its chief administrator and holds key appointments in boards of religious organisation, inter-religious organisation and schools in Singapore. He has been integral in setting and driving the directions of the Home as well as development of the Home's services.
Dr Kweh Soon Han	Dr Kweh is a lawyer at KSCGP Juris LLP. His areas of practice are real property law, company law, administrative and constitutional law, law of societies, employment law, and family and trust law. His experience in the laws and codes of governance relating to the formation and maintenance of charities, societies and non-profit organisations is invaluable in guiding the Home in ensuring governance compliance.
Ms Chan Poh Swai @ Chan Poh Swee	Ms Chan is a retired qualified Accountant holding a Bachelor Of Commerce Degree (majoring in Accountancy). She held the position of Treasurer of our Home's Management Committee for 2 terms - July 2006 to July 2008 and July 2012 to July 2016. She is currently on the board and serves as the Treasurer of religious societies, free clinic and nursing home. Her in-depth finance knowledge contributes significantly in putting in place a robust finance system for the Home. She is currently the Secretary of the EXCO Committee. Her years of experience with the Home is invaluable.
Dr Lau Kah Yong	Dr Lau is a Traditional Chinese Medicine Practitioner and has been a member of our Admission Committee since 2008. He works closely with the management team of the Home and plays a crucial role in ensuring smooth admissions of residents.
Mr Kek Seng Swee, Nicholas	Mr Kek was an Entrepreneur prior to joining Kong Meng San Phor Kark See Monastery as Operations Manager. He is an EXCO member since July 2012 and the EXCO Chairman since August 2014. His commercial experience and business acumen have benefited the Home in many aspects.
Mr Lee Boon Huat, Ben	Mr Lee is the Secretary of a religious organisation. Having served as a Management Committee for many years, he is able to relate, appreciate the issues raised and provide invaluable advice.

The MC draws up rules to govern the running of the Home, review and approve strategic plans and annual work plan set in accordance with the objects set out in the Constitution. A total of 6 MC meetings and 1 Annual General Meeting were held in the year of reporting. Meeting dates and members' attendance are as follows:

Board meeting from 1 April 2019 to 31 March 2020			
1.	26 April 2019	4.	30 October 2019
2.	28 June 2019	5.	27 December 2019
3.	28 August 2019 **	6.	25 February 2020
** 35th Annual General Meeting was held on 28 August 2019			

Members' Attendance:

No	Names	Attendance
1.	Bhikkhu Sik Kwang Sheng	100%
2.	Dr Kweh Soon Han	71%
3.	Mr Lim Teck Foon, Edmund	100%
4.	Mr Kek Seng Swee, Nicholas	43%
5.	Ms Chan Poh Swai @ Chan Poh Swee	100%
6.	Mr Yeap Soon Keong, Dan	57%
7.	Mr Lee Boon Huat, Ben	71%
8.	Mr Loke Chan Thai, Charles	57%
9.	Dr Lau Kah Yong	43%
10.	Mr Wong Chee Yeung, Stewart	71%
11.	Mr Goh Swee Kang, Jayson	71%
12.	Mr Tan Kim Kwang	71%

To assist the Board in reviewing and deliberating on specific aspects of running our Home and to execute its responsibilities, the MC has established seven sub-committees namely Executive Committee, Finance Committee, Admission Committee, Medifund Committee, Nomination Committee, Audit Committee and Building Committee.

Remuneration of Management Committee and Highest Paid Staff

All MC members, sub-committee members and advisor do not receive any remuneration and no staff sits in the Management Committee or sub-committee.

The Home has no paid staff who are close members of the family of MC members or CEO.

In compliance with the Code of Governance for Charities and Institution of a Public Character the annual remuneration of the Home's three highest paid staff, who each received remuneration exceeding \$100,000, fall into the following bands:

Remuneration Band	Number of Staff
Between \$200,001 to \$300,000	1
Between \$100,000 to \$200,000	2

Conflict of Interest

All MC members and staff are required to comply with the Home's conflict of interest policy and procedure.

Annual conflict of interest procedure statements are undertaken by all MC members and management staff.

Whistle-Blowing Policy

Our Home has established a whistle-blowing policy to address concerns about possible wrong-doing or improprieties in financial or other matters within the Home.

Policies, Review of Financial State and Explanation of Major Financial Transactions

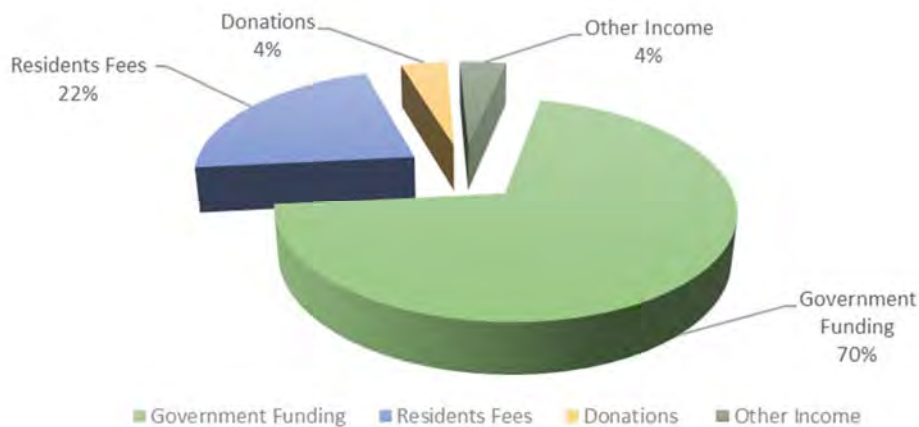
Funding Sources

Bright Hill Evergreen Home is financially supported by government grants and donations.

Key Financial Highlights

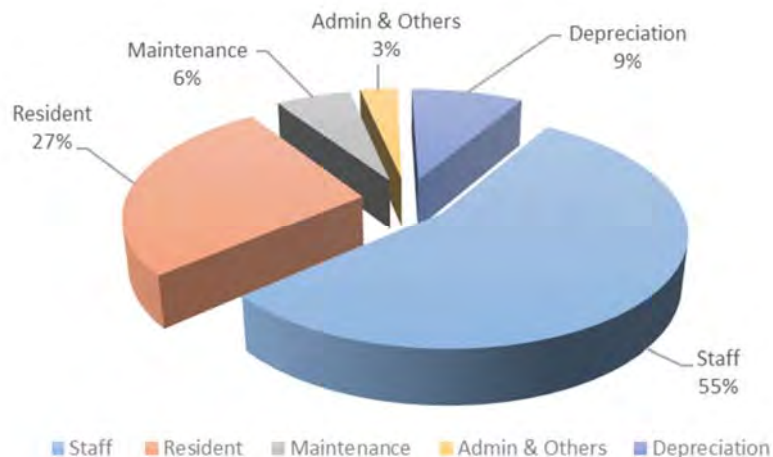
For the financial year ended 31 March 2020, our Home recorded a total receipts of S\$9.8m. Breakdown of the receipts are as follow:

% of Total Receipts \$9.8M



Total expenses for the financial year amounted to S\$9m, our Home posted a net surplus of S\$0.8m. Breakdown of the expenses are as follows:

% of Total Expense \$9M



Review and Changes in the Policy

The Constitution of the Home has been amended with approval from Commissioner of Charities and Registrar of Societies in October 2016.

Reserve Policy

Our Home reserve policy is that at any point in time we will have 5 years operational expenses kept as reserves and will be reviewed yearly by the Executive Committee if the amount of reserve is sufficient and if it needs to be revised.

The Home's reserve position as at 31 March 2020 is as follows:

Funds	Current Year	Previous Year
Unrestricted funds		
Accumulated General Funds	13,825,761	12,096,512
Unrestricted Designated funds		
Capacity Expansion	7,000,000	7,000,000
Capability Building	1,860,000	1,860,000
Total Unrestricted Funds	22,685,761	20,956,512
Restricted or Designated Funds		
Community Silver Trust	2,627,224	3,598,711
Designated donation	160,930	160,930
Total Restricted Funds	2,788,154	3,759,641
Total Funds	25,473,915	24,716,153
Total Annual Operating Expenditure	9,036,339	8,153,344
Ratio of Unrestricted Funds to Annual Operating Expenditure	2.51	2.57

Explanation of Purposes for which the Charity Assets are Held

No major assets were purchased in the year. Fixed assets of net book value S\$1.9m includes \$0.9m right-of-use assets, the balance S\$1m were purchased over the years for Home's operations use.

Purpose of Designated Funds

Our Home established the following funds in the financial year ended 31 March 2014 by transferring from the General Fund:

Capacity Expansion Fund of S\$7m with the objective to finance capital expenditure of the Home such as building development, furniture and fittings, office equipment, and any relevant operating expenses.

Capability Building Fund of S\$1.9m with the objective to invest in increasing capability of the Home's medical and therapy services, patient care equipment and human resource development to provide better services in future.

About Bright Hill Evergreen Home

Bright Hill Evergreen Home (BHEH) is a 248-bedded, accredited non-profit nursing home. We believe that our residents should enjoy life to the fullest encompassing gracious and healthy living, at the same time minimising ill health and retaining maximum use of their physical and mental faculties.

Our Home overlooks the beautiful flora and fauna of Punggol Waterway. The peace and tranquillity of the surroundings is ideal for recuperation and relaxation. It is conveniently located within 10 minutes of Punggol MRT station, making it easily accessible. The room settings provide residents with privacy and access to the bathroom. All rooms are complete with a pleasant finishing to allow all our residents to feel at home.



Bright Hill Road



Senja Road



Punggol Field

Our Second Home

Bright Hill Evergreen Home will be setting up a second nursing home with 188 beds. The new development is a 8-storey building and is adjacent to our existing home. The second home is designed to cater to dementia patients, providing a more home-like environment. With the two homes combined, we will be able to serve 436 needy elderly.

Construction of the new home started in February 2019 and was progressing smoothly and on schedule prior to COVID-19 Pandemic outbreak. Our team worked relentlessly alongside with MOH, the appointed professionals and contractors to provide input on the design of the ward to ensure it provides a safe and habitable living space for our residents as well as an efficient and effective workplace for the staff.



Construction of the new home was progressing smoothly and on schedule prior to COVID-19 Pandemic outbreak.

Bed Occupancy

The average occupancy rate for our Home is 98%, indicating a total of 243 out of the 248 licenced beds are occupied consistently.

AVERAGE OCCUPANCY RATE

98%

OCCUPIED

2%

VACANT



Residents' Profile

At Bright Hill Evergreen Home, we believe in providing quality care services for the aged, sick and destitute regardless of race, language or religion. The resident is profiled according to their level of care needs using the Resident Assessment Form before admission to the Home. At present, there are about 49% and 50% of our residents under Category 3 and 4 respectively. This indicates that they require moderate to total assistance and supervision in most aspects of their daily livings.



CATEGORY 4

50%

Highly dependent



CATEGORY 3

49%

Wheelchair /
Bed bound



CATEGORY 2

1%

Semi-ambulant

Nursing Care

We do our best to make our residents feel safe and comfortable. Going above and beyond the call of duty is a conventional yet vital task for every care staff. Apart from carrying out daily care, nursing interventions and procedures such as wound dressing and medication administration, sizable efforts are made for a more dignity-conscious care setting in which residents feel valued and truly cared for.

Our staff are trained to listen and respect resident's views, choices and decisions, and not make assumptions about how they want to be treated. Driven with care and compassion, our staff are able to achieve work satisfaction, knowing that each and every minute gesture makes a difference in the well-being of our residents.

Words of affirmation, coupled with warm smiles on next-of-kin (NOK) and residents' faces tell our staff that they indeed succeeded in bringing a little positivity to their day.

//

All the nurses are very sincere and helpful. I like to thank everyone for taking good care of my wife.

- (NOK) Mr Seah,
husband of Mdm Goh

”



//

Missy is kind and caring to me.

- Jenny, Resident

//



//

The resident can really feel it when we are sincere and genuinely care.”

– Paw Paw, Staff Nurse

//

//

I feel motivated and appreciated when the resident smiles and says thank you to me.

- Jester, Nursing Aide

”



Clinical Indicators

Internal Quality Assurance (IQA)

Under the Enhanced Nursing Home Standards (ENHS), it is mandated that every Nursing Home conducts an Internal Quality Audit (IQA) once every 6 months. The audit was conducted by the Quality Assurance (QA) Committee which comprise of Nursing and Operations staff.



The IQA are based on the two domains below:

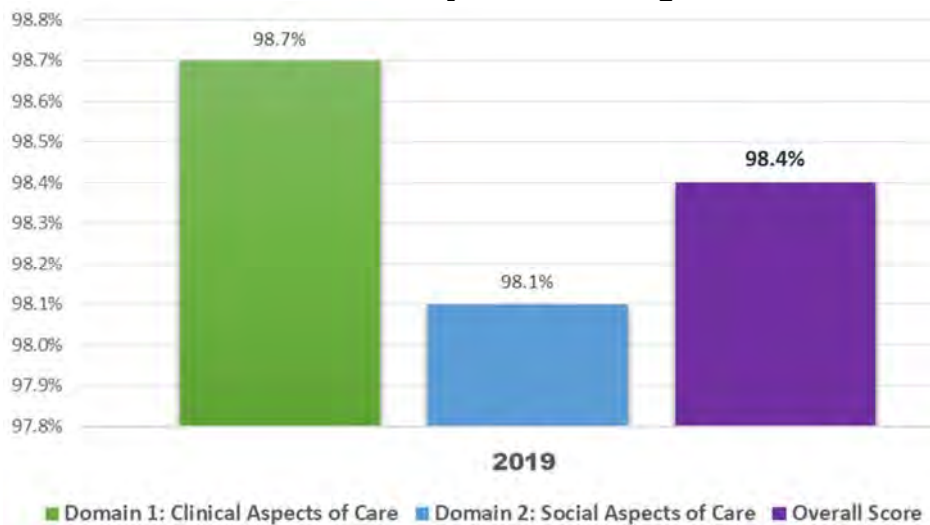
Domain 1 – Clinical aspects of care which has 12 indicators

Domain 2 – Social aspects of care which has 8 indicators

After each audit, the outcome of the QA indicators will be shared during a staff meeting to minimise any service gaps and reinforce areas for improvement.

BHEH has achieved a positive overall score of 98.4% for the two audits conducted in 2019.

2019 Internal Quality Audits Average Scores



Quality Improvement Initiatives

Infection Control Committee - Hand Hygiene Audit



We conduct Infection Control Audit at every ward quarterly. This is to assess the compliance level of infection control among staff and to create awareness on the proper use of Personal Protective Equipment (PPE).

Our average achievement for the 4 Audits conducted in FY 2019 is 99%.

The Committee also organised the World Hand Hygiene Event on 6 May 2019 to emphasize the importance of hand hygiene and proper hand washing techniques.

There were over 120 participants from all departments, including contracted cleaners, participating enthusiastically in the event.

Emergency Preparedness – Mask Fitting

As part of Infection Control Measures and Crisis Management, we will organise annual mask fitting exercise for staff in preparation of any disease outbreak.

In the beginning of 2020, Singapore was hit by COVID-19. Our pandemic preparation for many years was put into good use. We activated our PPE stockpile and stepped up on our infection control measures in the Home.

We also brought forward the annual mask fitting schedule for new staff to the month of February.

Furthermore, a few refresher sessions were conducted in February and March for staff (including admin/ancillary support) to refresh their knowledge on Infection Control and Standard Precautions.



Influenza Vaccination for Residents / Staff

Influenza vaccination was offered free of charge for residents and staff in May 2019 for optimal protection against the dreadful virus, especially for vulnerable individuals in high-risk groups.

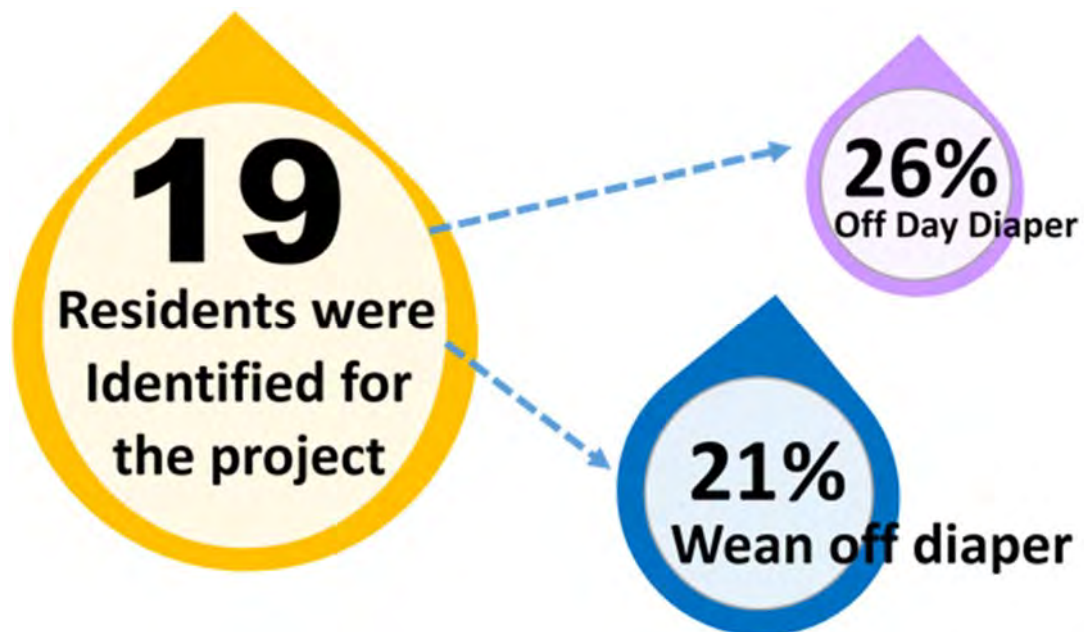
In this exercise, a total of 111 staff (74%) and 199 residents (82%) were vaccinated.



Contenance Management Project

The implementation of the project is on-going and can be challenging as some residents' physical condition deteriorated and were not able to continue with the interventions.

Despite the obstacles, the project has certainly increased the self - esteem and dignity of successful residents. It has also benefitted the Home in saving \$766 - \$949 on diapers for each resident annually.



NHELP Medication Module Project

In the beginning of 2019, under the guidance of AIC, we started our journey of implementing the Medication Module at NHELP IT system for residents. This is a web-based application for more efficient and safer medication management and administration. It is used for transcription, prescription and administration of medicine.



We were thrilled and motivated when it was rolled out at our first ward on 23 January 2019. We progressed to commence the module at a gradual pace in other wards. The journey was tough as we faced with start-up glitches in some wards.

With strong determination and support from the management, we overcame all difficulties and completed the project in September 2019. Moving on, we will continue to conduct training sessions to address challenges faced by our staff when using the system.

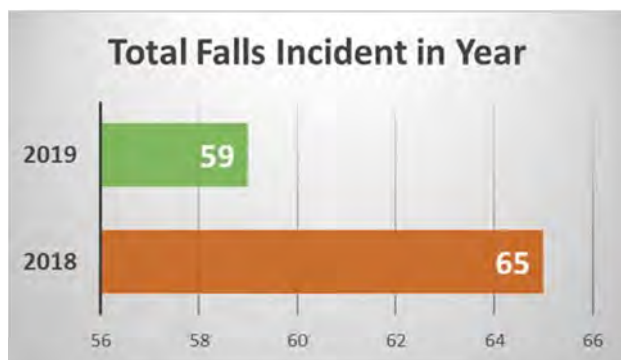
Fall Prevention Project

Preventing falls always pose a challenge to healthcare institutions. Falls have also been associated with lengthier of hospital stay, a high mortality rate and financial burdens.

In our Home, we have proactively created an environment for resident safety and injury prevention amongst our staff. We equip our staff with the relevant job safety knowledge and skills to provide individualised care while mitigating accidental occurrences. There are staff identified as “Champions” at each ward to implement and review interventions when needed.

The “Champions” would present at in-service sessions to share on case studies and interventions. Through active discussions, staff learn from one another and enhance competence levels.

In 2019, we are encouraged to see a 10% decrease in the rate of fall incidents. Educating our staff and ensuring a safe environment for our residents will always be an ongoing effort.



Wound Management Project

The Wound Management Project was formed to create a platform for staff to share about holistic wound and skin care for residents.



During the In-service sessions, staff learn from one another through case studies of residents with wound and skin issues. Information on latest skin care products and methods on maintaining skin health were also covered in the sessions.

Overall feedback was positive and many staff felt more proficient and confident to handle different types of complex wounds.

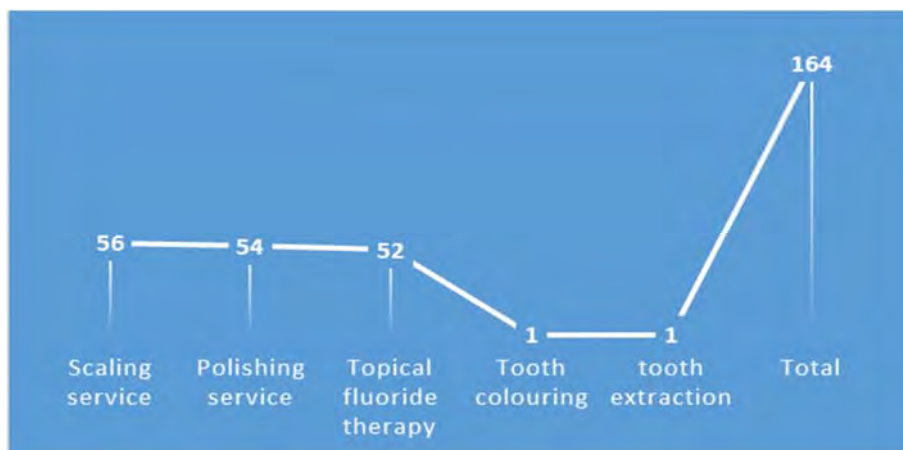
Mobile Dental Clinic

The Home recognizes the importance of providing good oral hygiene for our residents. The residents were provided with an oral toilet twice a day and we brought in the Mobile Dental Clinic (MDC) by Unity Dental Care to our residents twice a year in September and March.

This initiative was started since 2015. The bus parked within our home premise brings dental care to our doorstep, allowing our residents to enjoy the benefit of convenience at low cost.



No. of Dental Service in 2019



This chart shows the number of dental service received by our resident in 2019.

Procured Service for residents

Psycho-Geriatrician Consultation

Since 1 November 2018, Dr Low Bee Lee has been conducting psychogeriatric service for residents. Visiting monthly, she sees an average of 11 residents per session.

Dr Low provides consultation and treatment for mental and cognitive health issues such as depression, anxiety and dementia.

This service has benefitted our residents tremendously. Apart from improvements in the mental health of residents, the timely reviews by Dr Low have also spared our residents from the long waiting hours at external clinics.



Moreover, this initiative saves time, manpower and transportation costs for the Home.

Nursing Staff Training and Development

To keep abreast with the nursing care trends, it is important to provide continuous education and training for our staff. Our Home provides In-service and on-the-job training, as well as external professional courses for our staff.

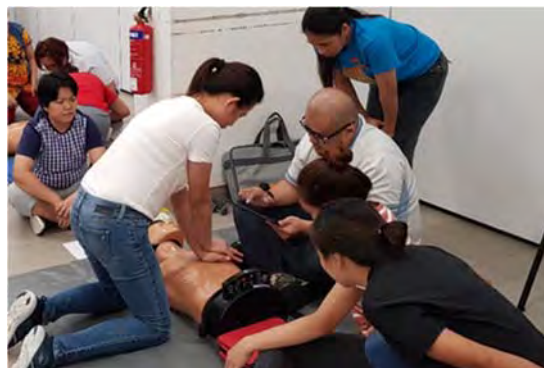
This year, the In-service committee organised 25 In-service training/talks with a total attendance of 654 participants. We are delighted that the trainings contributed to the transformation of each and every individual's aptitude and increment in the team's effectiveness.



Refresher sessions on proper hand wash and Standard Precautions for Infection Control is conducted quarterly to remind all staff to stay vigilant.

The Home sees the importance to equip all staff with life-saving techniques.

The BCLS/AED training for staff (including admin and ancillary support) was conducted from 2 July - 22 August 2019. A total of 110 staff attended the training.





“Learning the correct techniques and device for transferring at the in-service training helps me to ensure safety for both the resident and myself.”

- Jester, Nursing Aide

An initiative for Residents – Get up! Get Coffee! Be Happy!

On 11 March 2020, staff from the Role Model Programme organised a trial session for residents to have their breakfast at the rooftop garden. The objective is to take a break away from the daily routines and do something different. One local staff from Occupational Therapy Department stood by as a translator.

As expected, this initiative has brought both excitement and a refreshing feeling to the residents. Apart from having a wide variety of Singapore-style breakfast items such as You Tiao and Curry Puffs, they get to dine in a comfortable and relaxing ambience. The residents also managed to mingle with those from other levels and enjoyed the interactions over a sumptuous breakfast.



The trial session was successful, with staff and residents looking forward to the next gathering. The staff have already made great plans on next session. Unfortunately, it was put on hold due to the pandemic outbreak of COVID-19.

Nonetheless, the team looks forward to resume the initiative when the situation permits.

Singapore Health Quality Service Awards



The Singapore Health Quality Service Awards (SHQSA) is organised by SingHealth Duke-NUS Academic Medical Centre. It is a nationwide award to recognise and celebrate the exemplary efforts of healthcare professionals in improving patient experience.

On 14 January 2020, The Singapore Health Quality Service Awards was held at the University Cultural Centre in the National University of Singapore. The Guest-of-Honour was Deputy Prime Minister and Minister for Finance, Mr. Heng Swee Keat. He presented 4,295 Silver, Gold, Star and Superstar awards to healthcare professionals from 43 public and private healthcare institutions, community hospitals and agencies.

Award recipients were shortlisted through a strict criteria including commensurable acts going above and beyond for patients and colleagues. Additionally, the number of compliments and service awards received were taken into account.

As a first-time entrant for this year's Awards, we are proud and honoured that our staff were presented with 15 Silver Awards.

The Team is motivated to continue to strive for better and quality services to our residents for many more years ahead.

Rehabilitation Team

Moving to Person-Directed Care

The Rehabilitation Team played an important role in supporting the home on the Dignity Of Care project in the past 3 years. As the home is gearing up to start the new home, we accelerated our efforts to further enhance our care service to one that provides Person-Directed Care. The team participates actively in the design of the care model to serve more dementia residents. Together with the multi-disciplinary team, comprising of representatives from nursing, medical social work and rehabilitation departments, the team plans, develops and monitors care for individual to find the best way to provide their care.



Physiotherapy

Bright Hill Evergreen Home's Physiotherapy team, consisting of a Senior Physiotherapist and six Therapy Aides, adopts the key principles of autonomy, personhood and the strengths - based approach to provide holistic care for our residents. Care planning is centred on focusing on individuals' strengths and capabilities rather than their weaknesses and disabilities and to maximise choices for individuals receiving Physiotherapy services.

Going beyond helping our residents' to improve/maintain their physical health, the Physiotherapy team also looks after their social and psychological status.

We encourage residents to actively participate...

Residents are encouraged to participate in our rehabilitation programs like Active exercise, Group Exercise, Passive Exercise, Chest Physiotherapy, Balance & Strength Training, and Waltz group activity @ Roof Top Garden.

Perseverance and hard work...

Mr. Tan KC came to our home after he suffered an Ischemic stroke where the acute infarcts affected both sides of his brain, leading to Right and Left Hemiparesis. As he was unable to take care of himself, he was better suited to live in a nursing facility.

When Mr Tan was first admitted, he was not able to sit up on his own and could barely hold a fork or spoon. However, his perseverance and hard work in carrying out intense rehabilitation exercise daily paid off. Mr Tan progressed from using a wheelchair to walking independently with a walking frame and become independent in some of his ADLs as well.

Currently our team is working together with Mr. Tan to plan for his discharge back to the community soon.



Optimism and happiness...



Mr. Koh AK was admitted to Bright Hill Evergreen Home as his physical and functional status deteriorated. He was bed/wheelchair bound and could not perform his transfer without help. His sitting balance was poor and needed help for bed mobility. Under the guidance of the Physiotherapy team, Mr. Koh carried out intensive daily rehabilitation exercises.

Initially Mr. Koh was easily upset and frustrated with other residents and care staff easily. Besides helping him to improve on his physical condition, the team is always willing to lend him a listening ear to assist him to manage his emotional and psychological well-being better. He is now a changed person, having good rapport with the therapy team and jokes with big smile.

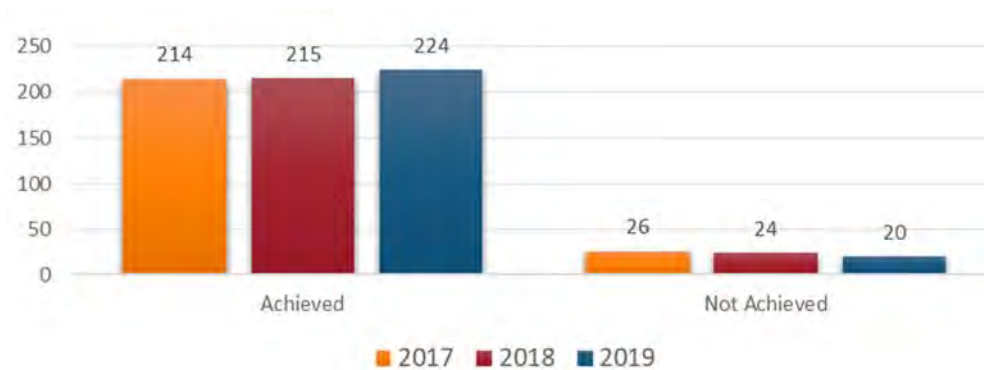
Mr. Koh can now walk independently using a walking stick, brimming with optimism and happiness in his stride. We are planning for his return to community living, which he is looking forward to.

Mr. Tan and Mr. Koh are classic examples of how diseases can affect a resident's life trajectory. As residents' illnesses develop, the Physiotherapy team is always there to connect and travel the journey of a different life-map with them. The team helps them to re-navigate as they respond and adapt to their changing health status.

The Individual Care Plan (ICP)

Our home maintains a consistent level in achieving the goals set under the ICP, designed and tailored according to individual resident's physical, mental and social needs.

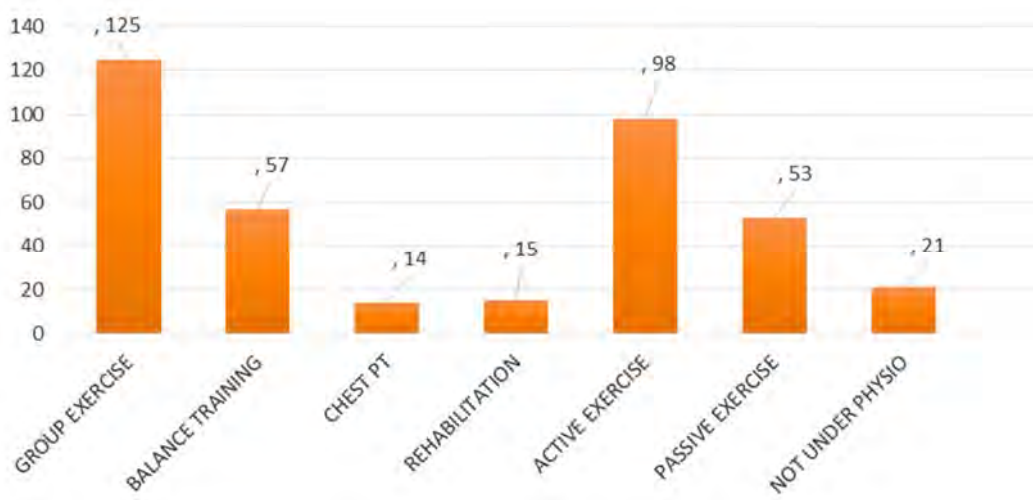
ICP Outcomes



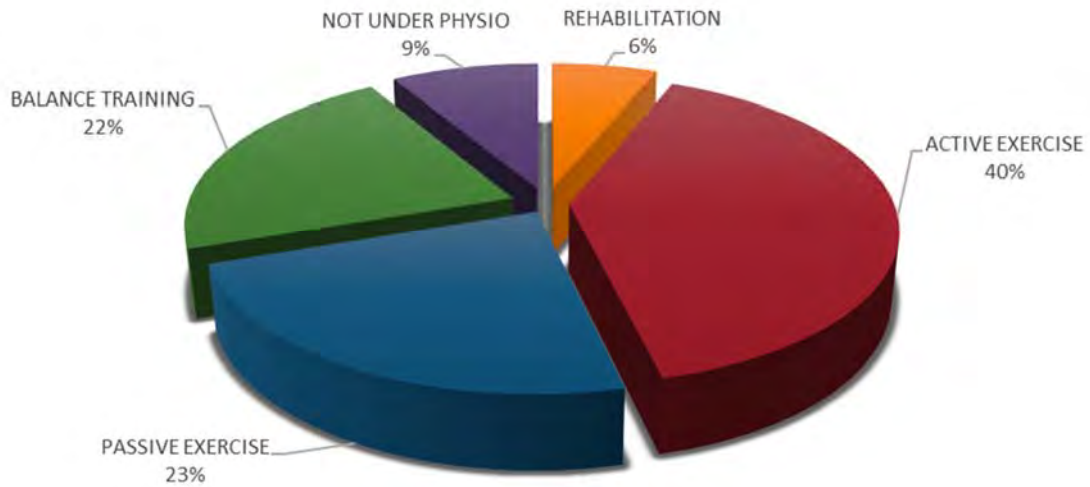
Residents are assessed or reviewed once every 6 months to evaluate their progress and care plans are re-designed accordingly. Some residents were not able to achieve their goals due to comorbidity. Their disease progression affected their functional status, resulting in cognitive impairment, fatigue, depression, pain and incontinence. The unpredictability of the disease reduced rehabilitation potential.

Types of Exercises and the Numbers in each...

BHEH Physiotherapy Data



PHYSIOTHERAPY STATISTICS



91% of our residents receive some form of therapy. Remaining 9% of residents are either independent in their function or prefer to opt-out from participating in physiotherapy exercises.

New Technology and equipment

We have also introduced few new equipment like **MOTO Tiles** and **Life Glider** to support and encourage residents for lower-limb strengthening and balancing, endurance and posture control.



MOTO Tiles



Life Glider

Occupational Therapy

Our home continued to procure Occupational Therapy (OT) Service from AWWA Ltd for the year. Supported by 3 full time Occupational Therapy Aides, the OT team strives to maintain our resident's capacity to perform day-to-day tasks including self-care, daily living and leisure. The team:

- Conducts initial OT assessments, follow-up reviews as well as other occupational therapy related assessments of residents.
- Participate in multidisciplinary discussion and develop individualized care plans for residents.
- Plan group and individual therapy programs and implement therapeutic activities and intervention.
- Conducts Activities of Daily Living (ADLs) and Instrumental Activities of Daily Living (IADLs) training for residents to maximise and improve function.
- Conducts environmental home assessment and prescribe appropriate assistive device for independent and safe community living for residents discharged to home.

Occupational Therapy Programs

OT programs are scheduled to run from 8:30am – 5:30pm daily, except Sunday. Programs duration typically ranges from 30 minutes to an hour. Residents are selected to participate in the various programs based on their physical, mental, social well-being and interest.

Maintaining familiar routine helps persons with dementia to know what to expect, to continue to do things on their own, thereby improving their social and functional abilities. OT team keeps an interest checklist on the alert residents to gather information on their preferred leisure activities so as to better understand their needs and aid in planning of activities.

We have maintained most of previous year's programs that are well-received and enjoyed by our residents. They include:

- | | |
|---|------------------|
| • Gardening | • Art & Crafts |
| • Cooking | • Karaoke |
| • Tai chi | • Current Events |
| • Food for thought (Cognitive program) | • Bingo |
| • Prosense and Individual Sensory Stimulation | • Zumba |

4 new programs were introduced this year, namely Enhanced feeding program, Communal dining program, Sensory garden and SilverPad Activities.

1. Enhanced Feeding Program

This feeding program was initiated to encourage residents to continue performing their own daily activities for as long and as much as possible. This empowerment gives them a life of dignity.

- Uphold self-image, identity and improved feeding capability
- Self-feeding minimizes dependency on nursing staff or therapy aides
- Improve residents food intake and reduce weight loss
- Provides an opportunity for care staff to learn about proper feeding facilitation, including the use of adaptive feeding aids.



Figure 1. Enhance feeding program outcome using MBI (Modified Barthel Index) assessment

The chart above compared the outcome of the 12 residents who participated in this program. Besides 1 resident who showed a decrease in function to total dependence due to decline in health, all other residents showed an increase improvement in resident feeding skills from Maximum assist to Minimal Assist - Independent feeding.

We will continue to monitor residents' progress in self-feeding and prescribe assistive device when necessary to improve feeding ability. Staff will also undergo service training on proper feeding facilitation to allow more residents to participate in this program.



2. Communal Dining Program

As part of the home's on-going Dignity of Care project, the OT team introduced communal dining to improve residents' social skills. It also gave residents the opportunity to maximise ADL independence as they need to scoop food from a common bowl to their own plate. This program was launched in February and first piloted on selected 4 full diet residents.

Although the goal of maximising their ADL independence were achieved, there were minimal social interaction amongst the residents. The program was well received by some as it reminded them of the old days where meals were taken with their loved ones, sitting and sharing food from the same table. For others, main reason for the lack of interaction was unfamiliarity with the rest.



Due to the COVID19 pandemic outbreak, this program was put on hold till further notice. We will review the program details based on our observation and feedback. There are however concerns about this program sustainability taking into consideration the need and importance to comply with the strict infection control measures.

3. Sensory Garden

The Sensory Garden program was designed for sensory profile residents who have limited physical and cognitive functions but are still able to respond to a variety of sensations. The residents experienced sensory stimulation in a natural garden environment using their sense of touch, smell, hearing and vision.



Figure 2. OT Aides facilitating residents in Level 1 garden and showing them the passion fruits.

Using the WBP (Well - being Profile) outcome as a measure, residents displayed positive behavioural signs when during participation. The resident showed some or significant signs of the following responses:

- Ability to communicate wants, needs and choices verbally or non-verbally
- Made contact with other people
- Displayed warmth and affection
- Showed signs of pleasure or enjoyment
- Improvement in level of alertness and responsiveness
- Relaxed posture or body language

To further enhance this program, we will be introducing Afternoon Tea Session, giving precedence to the less engaged residents.

4. SilverPad

Using technology to engage our residents, our care team guided them in the use of SilverPad. SilverPad is an elder friendly tablet with a simple interface and curated local content that enable elders to use tablets independently. Residents played cognitive games in Singapore context, selected TV channels, music or movies of their interest independently. Equipped with a multi lingual feature, it allowed residents to select their preferred language.

Our residents spent approximately 2500 hours on the tablet in the first month when we introduced the SilverPad. The top 2 commonly used applications were Cognitive games and YouTube.

The team will work towards installing more applications which are of interest for our residents on the tablets. We will also be involving our residents in exploring other more commonly used applications.



Figure 3. Resident Mdm Ng enjoyed playing cognitive games using the SilverPad

Tracking Residents OT Progress

Resident's OT progress are reviewed 6 monthly. The assessment tools used are PAL (Pool Activity Level), MBI (Modified Barthel Index) and MMSE (Mini Mental State Exam).

- MBI (Modified Barthel Index)

This is an evaluation tool assessing resident's self-care and mobility activities of daily living. The areas assessed are; Feeding, Personal hygiene, Dressing, Bathing, Bowel and Bladder control, Toileting, Transfer, Ambulation and Stair Climbing.

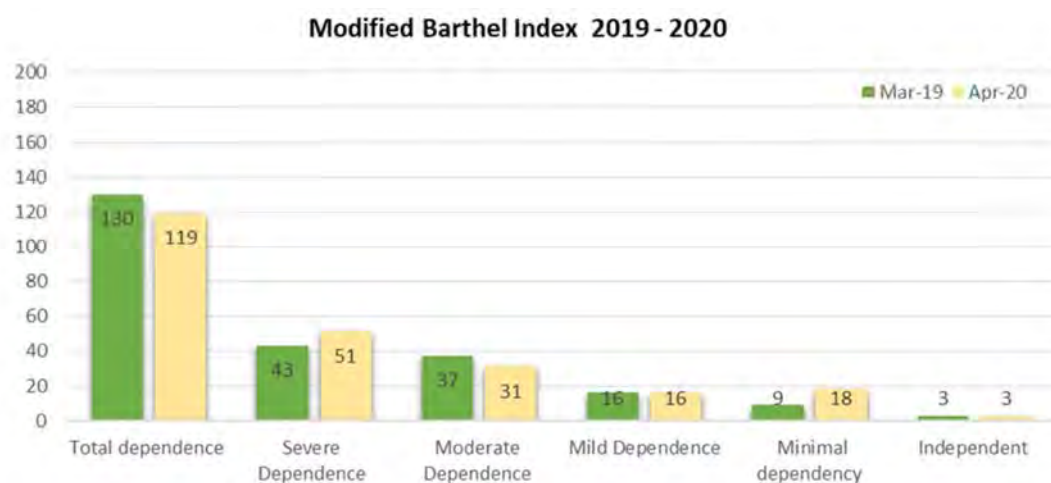


Figure 4. Modified Barthel Index 2019 – 2020

The number of Independent and Mild Dependent resident remained unchanged over the year. As residents aged, Minimal dependent resident also doubled as compared to last year data. Although there was a slight increase for Severe Dependence residents, we are glad to share that the number of Totally Dependent residents has decreased to 4% as compared to last year.

- MMSE (Mini Mental State Exam)

A widely used cognitive assessment tool for elderly. It includes tests of orientation, attention, memory, language and visual-spatial skills. MMSE score interpretation:

- 0 -17 Severe cognitive impairment
- 18 - 23 Mild to moderate cognitive impairment
- 24 - 30 Normal limits of cognition

MMSE (Mini Mental State Exam) 2019 - 2020

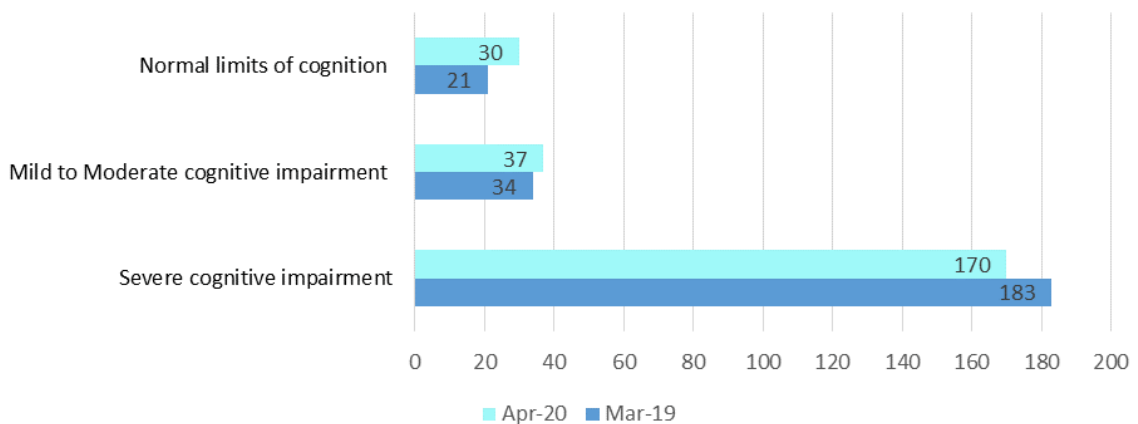


Figure 5. MMSE (Mini Mental State Exam) 2019 – 2020

MMSE indicator for this year showed significant improvement in resident’s cognitive function for the past year. We saw a 7% drop in the number of residents with Severe Cognitive Impairment and the number of residents with Normal Cognitive level increased by 42% as compared last year. Mild to Moderate Cognitive impairment remained stable.

Occupational Therapy Goals

OT primary goal is to help improve/maintain residents Activities of daily living (ADL), physical and cognitive skills. The team also strives to improve residents’ well-being through social participation in OT programs, engaging them in meaningful activities to achieve quality of life.



Figure 6. Outcome of OT Goals 2020

Reviewed and assessed in April 2020, 78% of residents achieved the OT goals set one year ago. 22% did not achieve or only partially achieved the goals set due mainly to deterioration of medical condition or uncooperative behaviour.

Speech Therapy

Speech Therapy services under Speech Therapy Works LLP was renewed for another year from April 2019 to March 2020. Services provided include:

- Swallowing and feeding assessment and management
- Speech, voice and language assessment and management



The Speech Therapist (ST) visits up to 3 hours a week and on an average sees about 12 residents during her visits.

There were about 65 residents that were on regular follow up with the ST over the 1 year period.

About 20% of the residents' diet was upgraded whilst 65% of the residents' diet remained unchanged and another 15% of the residents' diet had to be downgraded due to deterioration in their medical conditions.

3 residents were also successfully weaned off the nasogastric tube during the past year.

Medical Social Services

Our Medical Social Worker (MSW) is part of the multidisciplinary health care team, supporting and promoting the psychoemotional well-being of our residents.

Headed by a Senior MSW, supported by a MSW and a Social Work Associate, the department provides psychosocial support and intervention to our residents and their families to cope with issues arising from illness, trauma and disabilities.

Our MSW team walks the journey with our residents from the start of their admission until their discharge from the Home, providing relevant support and interventions at different points of the journey, whenever appropriate.



Through effective coping strategies and supportive programs, MSW strives to empower our residents with opportunities to live meaningfully, despite their current limitations.

Enhanced Admission Process

We recognize how difficult it can be for both residents and family to make the decision to transit from their own homes to a nursing home.

As part of our Home’s mission to improve the admission experience for our new residents, we have enhanced the process so that potential residents feel that they are transiting from their homes to a new home environment, rather than just a healthcare facility.

One of the ways we do so, is right from the start, when we have our first few contacts with our potential residents. For those who may have difficulty travelling to our Home for a visit, we have pictorial and video images to give them an idea of how and what the Home is like, and information about the types of services and activities provided. This can help them to visualize and be mentally prepared for the transition, which can often help to smoothen the nerves during initial adjustment period.

While we provide information to our potential residents and their family members, we also collate vital information about the resident themselves – their likes and dislikes and their lifestyle habits, etc. This information will then be shared between care staff so as to provide the relevant person oriented care when the new resident moves in.



Integrated Care Planning (ICP)

One of the meaningful projects that the department has embarked on in FY19/20 was to look into the process of integrated care planning for all our residents.

An integrated care plan is a process whereby the Home looks into the overall holistic care provision for our residents, with the primary goal of enhancing their wellbeing, be it physically, mentally and/or spiritually.

Moving away from the traditional medical care model, the process takes on a multi-disciplinary approach, involving inputs from care staff from different disciplines such as nursing, rehabilitation team and medical social services. The ICP process also takes into consideration feedback from residents themselves on how and what they would like to focus on, to improve the quality of their lives.

Using the Bradford Wellbeing Profile Tool as a starting point to establish baseline for each of our residents, our department facilitates the ICP discussion with the aim of collating information on individual needs and preferences so as to enhance the care planning process for the provision of holistic person centred care.

An example of an ICP goal can be to increase pleasure or enjoyment in daily life of our resident. For a resident with this ICP goal, our multidisciplinary team can then plan care provision geared towards increasing enjoyment of daily life. For example, for someone who enjoys music and social interactions, this could mean providing a radio by bedside and engaging her in suitable social activities and outings.

For another resident who may be on tube feeding, but derives pleasure from eating, we can explore pleasure feeding options with input from various professionals such as speech therapist and dietician, and support from the nursing team. Other team efforts could also include sensory stimulation through other senses, such as olfactory – stimulation via pleasant smells like vanilla, coffee etc.

The ICP program is an ongoing project which we are implementing for all residents and is a continuous process with regular reviews to adjust to our residents' changing needs.



Advanced Care Planning (ACP)

Advance Care Planning is a process of anticipatory care planning - that captures and reflects a person's preferences on future care options and goals, in event of a medical crisis.

As trained ACP facilitators, our MSW team engage residents and their family members in dialogues to clarify their understanding of their illness and treatment options, values, beliefs, and goals of care, as well as identify wishes.

This process is important as it enables family members to make informed choices in the event they have to make healthcare choices on their loved one's behalf.

In FY19/20, our MSW team facilitated and completed ACPs for 21 of our residents.



Reminiscence with Movies

There is just something about good movies that makes us think and feel, while entertaining us.

In FY19/20, Bright Hill Evergreen Home embarked on a monthly movie journey with some of our residents as we go through local movies that gives us glimpses of the past.

Using local movies that showcased the tumultuous times of nation growth in the 1960s and 70s, different conversations were sparked during the movie screenings, as residents share their experiences during that period of their youths and growth.



One particular scene in a movie which depicted fireworks in kampongs during Chinese New Year reminded many of our residents the good old carefree days of their youth.

Research have shown that seniors who reminisce positively may have improved quality of life as they are often brighter and smile more after remembering happy memories. It can also be a good source of stress reliever as they share their past with someone, and allows them to resolve issues from their past which they may not have dealt with previously.

Capturing Life Stories

Another purposeful project that our department is spearheading is the capturing life stories of our residents into individual booklets, which the residents can keep.

Every one of us have a life story, which evolves as we accumulate more life experiences. It often revolves around the roles that we play in our lives, for example, as a child, parent, spouse, sibling, employee, etc. More often than not, these experiences form the foundation of our beliefs and attitudes towards life.

Going through life stories can be therapeutic. Through the process, our residents get to look through their life experiences from an overarching developmental perspective, which can sometimes be validating, and other times thought provoking.

We piloted the project in late 2019 with five residents and received very positive participant feedbacks. Our department will continue to identify and work with other suitable residents on their individual life story projects.



Discharge Planning

Nursing homes belong to the category of intermediate and long-term residential care institutions (ILTC) in Singapore, as residents generally are unable to care for themselves due to their chronic health conditions.



However, with good nursing care and active rehabilitation, some of our residents do manage to improve well enough to reintegrate into the community.

Our MSW team employs the “many helping hands” approach as part of the discharge process.

By involving different stakeholders such as government support, community services, family support as well as empowerment of the resident, our Home successfully reintegrated three residents into various community settings, which are more suited for their needs and life stages in 2019/2020.

Memorial Service

We recently held our inaugural memorial service in January 2020, in memory of our late residents who left us in the last quarter of 2019. The service was secular in nature and we invited care staff and other fellow residents who knew the late residents well.

Our quarterly memorial service aims to remember and celebrate the lives of our late residents, who have become part of our big family, regardless of the length of time they have spent with us.

In the service, we shared snippets of stories that we knew of the late residents, and invited representatives to light a small candle and held a moment of silence, in memory and respect of them.

It was a short but meaningful session that reminded us to cherish each person we are in company of, rather than to focus on the illnesses they may have.



Our Staff

It is without any doubt that the biggest asset of our home is our team of dedicated staff. They work tirelessly all year round doing their utmost best to ensure our residents are kept safe and healthy. The home constantly work with the staff to place them in roles that best fit the individual's knowledge, expertise, abilities, skillsets, and experience. It is a win-win situation for all as it not only allow our home to recognize the value of our employees and reward them fairly, it also boost staff and team morale.

Working as a team to build positive work culture....

Our management communicates regularly with the staff to clearly establish the home's core value of providing quality holistic care to our residents. We strive to establish a workplace culture with common shared values and attitude in promoting dignity and allowing our residents to lead a better quality of life.

All newly recruited staff must attend an orientation program whereby we share the home's beliefs, outline and reinforce the core values. New recruits are able to work happily alongside with the rest of team within a short time. The home constantly works with the staff to build a positive workplace culture and improves teamwork. This raises staff morale, increases productivity, efficiency and reduces stress.



Equal opportunity for all....

Our home is committed to provide equal opportunities for all staff, including remuneration, recruitment, training and promotion. We see the importance and benefit of ensuring workplace harmony and that no discrimination of any form or manner takes place within the home. Human resource management is always based on fair and objective criteria with adequate affirmative measures taken.

It is important to foster a sense of pride and ownership amongst the employees. Every staff, regardless of rank and file are given the opportunity to be trained and take on roles that best fit their abilities and expertise. Staff, be it individually or working as a team, are guided to initiate projects that contribute to the development of their professional and personal skills. All staff are given every encouragement to realize to their fullest potential.

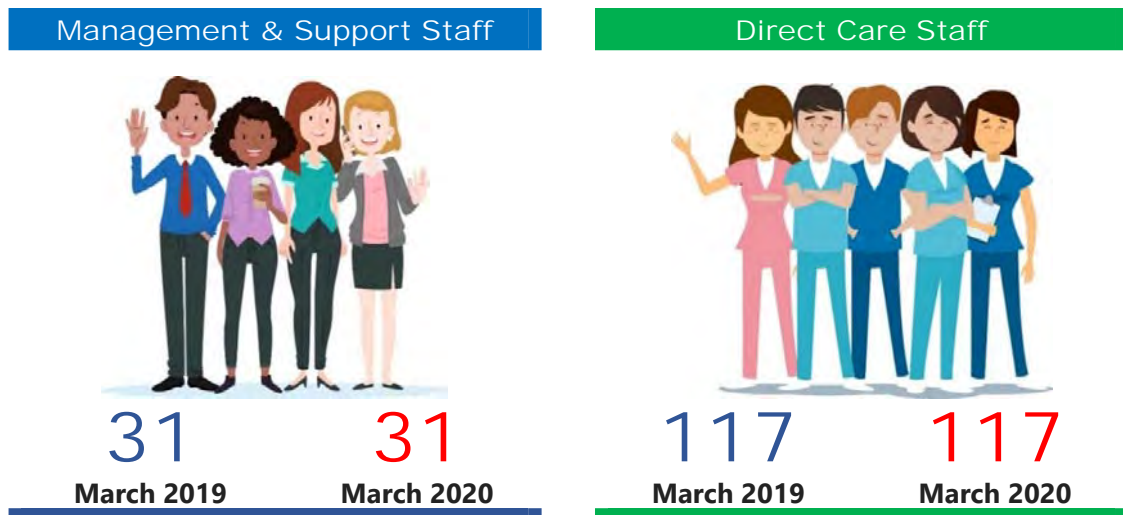


Care for our staff...

We appreciate and understand that in creating the right compensation plan, it will lead to higher job satisfaction and a stronger workforce. Productivity and efficiency will also increase correspondingly. To ensure that our staff are rewarded appropriate and fairly, our home take guidance from salary benchmark information released by the various governing authorities.

Staff Strength & Training

Our home is committed to ensure that we are adequately staffed to provide quality care for our residents. Staff attended relevant training and development programs to enable them to perform better in their job. Training gives the staff a better understanding of their roles, responsibilities and further strengthen their skills. Development programs, focusing mainly on improving soft skills such as problem solving, communication and leadership skills, were rolled out to bring the staff to a higher level. These programs helped to build their confidence in their abilities, further enhancing their overall performance.



Staff Welfare

Nothing beats good food to keep our staff happy and healthy. The home put in tremendous effort in planning a diversified and balanced daily food menu for the staff to ensure that they stay healthy and fit. We also constantly seek for staff feedback on the food provided and try to meet their dietary request whenever possible.



Staff enjoying the Nurses' Day celebration party with good food, fun and games. In appreciation of their good work on this special day dedicated to our care staff, the home also presented a goody bag of snacks and gift vouchers to each staff.



Staff whipped up a feast during the Christmas and New Year celebration party. Each nationality cooked their countries' common favourite dishes and shared amongst themselves.



Exercising time....

Appreciating the need to keep fit and healthy, the staff also engage in a variety of exercises programs. The Punggol Waterfront provides a picturesque route for jogging enthusiasts while the home tries to provide the facilities and equipment to support other form of programs.



Boys keeping fit with a game of basketball



Girls try to stay in shape with Zumba

Volunteers and Donors



Thank you Volunteers and Donors for giving us your relentless support all these years.

Many of you have been donating generously and give your time and dedication to ensure our home runs smoothly. It has made our home a better place to live in and this happens because of you. Perhaps our residents may not have told you so, but you have made them happy and they are always thankful.

Thank you so much for all your help and hard work. You are always there for us whenever we need you. Words cannot express how grateful we are to have you with us and we could never ask for more.

With your support, our home is able to accomplish our goal of providing our residents with quality care and for us to continue working towards constantly improving on our service level. You truly make the difference for us, and we are extremely grateful.

Volunteers' Profile

SCHOOL	INDIVIDUAL	GROUP	CORPORATE
49	16	33	27



Events & Activities



A Trip to the Chinese New Year Street Bazaar at Chinatown



A trip to the Chinese New Year Festive Street Bazaar at Chinatown has become a traditional outing event for our residents.

We started our day with a wholesome breakfast at Maxwell Market Hawker Centre before we visited the street bazaar which stretches from Pagoda Street to Sago Street. It is the best place to feel the spirit of the festive season where it can get really crowded and hot, but the jolly mood can't be beat.

We were blessed with a breezy afternoon and it was a pleasure taking our time to browse through the street stalls, sampling traditional mouth-watering goodies – melon seeds, dried persimmons, cookies and "nian gao" (sticky New Year rice cake).

The trip ended at the food street where cold and hot desert were served to our residents.



Our Visit to River Safari



Together with our residents and volunteers, we visited River Safari, a river-themed zoo and aquarium. It is the first of its kind in Asia and features freshwater attractions and river boat rides. We discovered how deep Africa's Congo River runs, and the religious significance of the Ganges in India.

Our residents had the opportunity to get up close with the river giants and emerged into the Giant Panda Forest to meet the precious gifts from China, giant pandas Kai Kai and Jia Jia.

It was definitely an interesting experience for both our elderly and volunteers. There's certainly no shortage of fun and discovery at the Singapore River Safari!



A Day Out To The Changi Village



Accompanied by volunteers, our residents spent a day out at Changi Village. They enjoyed a delicious meal at Changi Village Hawker Centre. It is a food centre offering western food, satay bee hoon, ayam penyet, and the famous Changi Nasi Lemak.

After dinner, our elderly had a relaxing stroll at the Changi Beach Park. The park still retains a kampong ambience with stretches of pristine white beaches dotted with coconut palms, park benches and shelters.

It was an enjoyable outing for both our elderly and volunteers.

CNY Celebration with Kwan Yong Construction Pte Ltd



Value in Action (VIA) from Schools & Institutions



Visiting by Pre-Schools & Child Care Centre



Corporate Social Responsibility (CSR) Program



Visit by Maha Bodhi School teachers and staff



Karaoke and Bingo session by MINDEF employees



Brass Band performance by The Esplanade Co Ltd

Individual and Group Volunteering



Miss Dora conducts weekly light workout for our residents



Monthly haircut by Love Care Volunteer



Fun and Games organised by Chandran Family



Chinese New Year celebration organised by PCF Sparkletots Punggol East



To each and every individual, group and corporation who had given so generously in cash and in-kind, a very big THANK YOU.

We are all committed to a common cause, providing quality and dignified care to our pioneer generations. You have shared, gave generously and unconditionally your time and love to our residents.

Many of you had given so much of yourselves to our elderly and expect so very little in return. Without your constant support, we on our own would not be able to deliver what we believe is the best to our residents. This is home to many of our residents. All of us, including you, make a great difference to their life.

In compliance with the Singapore Personal Data Protection Act, the Home shall not disclose the names of our donors. You may contact the Home directly should you require more information in this area.

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Annex A –

Governance Evaluation Checklist for the Financial Year
Ended 31 March 2020

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Governance Evaluation Checklist For the Financial Year Ended 31 March 2020

S/NO	CODE GUIDELINE	CODE ID	RESPONSE	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	
2	Are there governing board members holding staff appointments?		No	
5	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	
6	All governing board members must submit themselves for re-nomination and re-appointment, at least once every 3 years.	1.1.8	Complied	
7	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	
8	Is there any governing board member who has served for more than 10 consecutive years?		Yes	
9	The charity discloses in its annual report the reasons for retaining the governing board member who has served for more than 10 consecutive years.	1.1.13	Complied	
10	There are documented terms of reference for the Board and each of its committees.	1.2.1	Complied	
CONFLICT OF INTEREST				
11	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	
12	Governing board members do not vote or participate in decision making on matters where they have a conflict of interest.	2.4	Complied	
STRATEGIC PLANING				
13	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	

HUMAN RESOURCE AND VOLUNTEER MANAGEMENT				
14	The Board approves documented human resource policies for staff.	5.1	Complied	
15	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	
16	There are processes for regular supervision, appraisal and professional development of staff.	5.5	Complied	
17	Are there volunteers serving in the charity?		Yes	
18	There are volunteer management policies in place for volunteers.	5.7	Complied	
FINANCIAL MANAGEMENT AND INTERNAL CONTROLS				
19	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	
20	The Board ensures that internal controls for financial matters in key areas are in place with documented procedures.	6.1.2	Complied	
21	The Board ensures that reviews on the charity's internal controls, processes, key programmes and events are regularly conducted.	6.1.3	Complied	
22	The Board ensures that there is a process to identify, and regularly monitor and review the charity's key risks.	6.1.4	Complied	
23	The Board approves an annual budget for the charity's plan and regularly monitors the charity's expenditure.	6.2.1	Complied	
24	Does the charity invest its reserves (e.g. in fixed deposits)?		Yes	
25	The charity has a documented investment policy approved by the Board.	6.4.3	Complied	
FUNDRAISING PRACTICES				
26	Did the charity receive cash donations (solicited or unsolicited) during the financial year?		Yes	
27	All collections received (solicited or unsolicited) are properly accounted for and promptly deposited by the charity.	7.2.2	Complied	
28	Did the charity receive donations in kind during the financial year?		Yes	
29	All donation in kind received are properly recorded and accounted for by the charity.	7.2.3	Complied	
DISCLOSURE AND TRANSPARENCY				
30	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	

31	Are governing board members remunerated for their services to the Board?		No	
34	Does the charity employ paid staff?		Yes	
35	No staff is involved in setting his own remuneration.	2.2	Complied	
36	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 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	
37	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 “belonging to the Executive Head” 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	
PUBLIC IMAGE				
38	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	

Annex B –

Audit Financial Statements for the Financial Year Ended
31 March 2020

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BRIGHT HILL EVERGREEN HOME
FINANCIAL STATEMENTS
FOR THE FINANCIAL YEAR ENDED
31 MARCH 2020

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BRIGHT HILL EVERGREEN HOME
(Registered in Singapore under the Societies Act)

STATEMENT BY THE MANAGEMENT COMMITTEE

On behalf of the Management Committee, we do hereby state that in our opinion, the financial statements of Bright Hill Evergreen Home (the "Home") as set out on pages 5 to 30 are properly drawn up in accordance with the Societies Act, Chapter 311, Charities Act, Chapter 37 and other relevant regulations and Financial Reporting Standards in Singapore so as to present fairly, in all material respects, the financial position of the Home as at 31 March 2020, and the financial performance, changes in funds and cash flows of the Home for the financial year ended on that date.

On behalf of the Management Committee



Bhikkhu Sik Kwang Sheng
Chairman



Lim Teck Foon
Treasurer

30 SEP 2020

**INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF
BRIGHT HILL EVERGREEN HOME**

(Registered in Singapore under the Societies Act)

Report on the Audit of the Financial Statements

Opinion

We have audited the accompanying financial statements of Bright Hill Evergreen Home (the "Home") as set out on pages 5 to 30, which comprise the balance sheet as at 31 March 2020, and the statement of comprehensive income, statement of changes in funds and statement of cash flows for the financial year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the accompanying financial statements are properly drawn up in accordance with the Societies Act, Chapter 311 (the "Societies Act"), the Charities Act, Chapter 37 and other relevant regulations (the "Charities Act and Regulations") and Financial Reporting Standards in Singapore ("FRSs") so as to present fairly, in all material respects, the financial position of the Home as at 31 March 2020 and the financial performance, changes in funds and cash flows of the Home for the financial year ended on that date.

Basis for Opinion

We conducted our audit in accordance with Singapore Standards on Auditing ("SSAs"). Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section of our report. We are independent of the Home in accordance with the Accounting and Corporate Regulatory Authority (ACRA) *Code of Professional Conduct and Ethics for Public Accountants and Accounting Entities* (ACRA Code) together with the ethical requirements that are relevant to our audit of the financial statements in Singapore, and we have fulfilled our other ethical responsibilities in accordance with these requirements and the ACRA Code. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Other Information

The Management Committee is responsible for the other information. The other information comprises the information included in the Annual Report but does not include the financial statements and our auditor's report thereon.

Our opinion on the financial statements does not cover the other information and we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

**INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF
BRIGHT HILL EVERGREEN HOME (cont'd)**
(Registered in Singapore under the Societies Act)

Report on the Audit of the Financial Statements (cont'd)

Responsibilities of the Management Committee and Those Charged with Governance for the Financial Statements

The Management Committee is responsible for the preparation and fair presentation of these financial statements in accordance with the Societies Act, the Charities Act and Regulations and FRSSs, and for such internal control as the Management Committee determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the Management Committee is responsible for assessing the Home's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the Management Committee either intends to liquidate the Home or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the Home's financial reporting process.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with SSAs will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with SSAs, we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Home's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the Management Committee.

**INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF
BRIGHT HILL EVERGREEN HOME (cont'd)**
(Registered in Singapore under the Societies Act)

Report on the Audit of the Financial Statements (cont'd)

Auditor's Responsibilities for the Audit of the Financial Statements (cont'd)

- Conclude on the appropriateness of the Management Committee's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Home's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Home to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

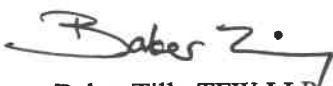
Report on Other Legal and Regulatory Requirements

In our opinion,

- (i) the accounting and other records required to be kept by the Home have been properly kept in accordance with the provisions of the Societies Regulations enacted under the Societies Act, the Charities Act and Regulations; and
- (ii) the fund-raising appeal held during the financial year ended 31 March 2020 has been carried out in accordance with Regulation 6 of the Societies Regulations issued under the Societies Act and proper accounts and other records have been kept of the fund-raising appeal.

During the course of our audit, nothing has come to our attention that causes us to believe that during the financial year:

- (i) the Home has not used the donation moneys in accordance with its objectives as required under Regulation 11 of the Charities (Institutions of a Public Character) Regulations; and
- (ii) the Home has not complied with the requirements of Regulation 15 (Fund-raising expenses) of the Charities (Institutions of a Public Character) Regulations.



Baker Tilly TFW LLP
Public Accountants and
Chartered Accountants
Singapore

30 September 2020

BRIGHT HILL EVERGREEN HOME
(Registered in Singapore under the Societies Act)

STATEMENT OF COMPREHENSIVE INCOME
For the financial year ended 31 March 2020

	Note	Unrestricted funds \$	Restricted funds \$	2020 \$	2019 \$
Income					
<i>Voluntary income</i>					
Donations	4	359,198	–	359,198	513,809
Government subventions		5,857,703	–	5,857,703	5,347,182
Fund for Residents		–	–	–	6,500
Training grant		29,826	–	29,826	1,121
Community Trust Fund (CST)		–	478,898	478,898	640,591
MOH - Disbursement of rental		512,984	–	512,984	512,984
MOH - RR funding		5,424	–	5,424	174,333
MOH - ILTC salary adjust exercise		–	–	–	414,784
SDF Grant		255	–	255	52
		6,765,390	478,898	7,244,288	7,611,356
<i>Income from charitable activities</i>					
Programme fees from paying residents		2,123,419	–	2,123,419	1,909,025
Total income		8,888,809	478,898	9,367,707	9,520,381
Other income					
Interest income		328,736	–	328,736	233,862
Special employment & wage credit		34,826	–	34,826	48,476
Others		62,832	–	62,832	47,044
		426,394	–	426,394	329,382

The accompanying notes form an integral part of these financial statements.

BRIGHT HILL EVERGREEN HOME
(Registered in Singapore under the Societies Act)

STATEMENT OF COMPREHENSIVE INCOME (cont'd)
For the financial year ended 31 March 2020

	Note	Unrestricted funds \$	Restricted funds \$	2020 \$	2019 \$
Less: Expenditure					
<i>Cost of charitable activities</i>					
Fundraising expenses		241	—	241	375
Recruitment expenses		9,039	—	9,039	6,927
Residents outing		7,332	5,380	12,712	9,009
Cleaning expenses		126,441	191,559	318,000	318,000
Dignity of care project		—	177,998	177,998	73,637
New therapy and other program		—	49,727	49,727	73,637
Patient care expenditure		—	355,246	355,246	14,095
Diapers		114,435	—	114,435	103,892
Rental of building		—	—	—	512,984
Repair and maintenance		230,905	21,227	252,132	195,019
Staff costs	5	3,313,610	25,582	3,339,192	3,092,184
Supplies and materials		960,425	335	960,760	957,481
Transportation		1,733	—	1,733	2,935
Utilities charges		308,720	—	308,720	289,908
		5,072,881	827,054	5,899,935	5,853,197
<i>Governance and other administrative costs</i>					
Audit fee		17,500	—	17,500	17,500
Bank charges		1,138	—	1,138	975
Communication		5,117	—	5,117	4,831
Depreciation of property, plant and equipment	6	568,444	224,904	793,348	344,448
GST expenses		154,271	—	154,271	127,823
Minor assets		18,187	50,599	68,786	66,542
Insurance		9,602	—	9,602	9,834
Interest expense on lease liabilities		36,374	—	36,374	—
Licenses & subscriptions		5,797	—	5,797	6,025
Stamp duties		—	—	—	5,893
Loss on disposal of property, plant and equipment		—	—	—	29,189
Membership fee		851	—	851	4,097
Miscellaneous expenses		1,241	—	1,241	5,755
Motor vehicles expenses		25,437	—	25,437	16,272
Professional and legal fees		760	35,438	36,198	9,445
Postage		836	—	836	723
Printing and stationeries		16,057	—	16,057	20,151
Property, plant and equipment written off		436	210	646	18,952
Refund of Community Silver Trust grant		—	303,253	303,253	—
Staff costs	5	1,651,025	8,927	1,659,952	1,611,692
		2,513,073	623,331	3,136,404	2,300,147
Total expenditure		7,585,954	1,450,385	9,036,339	8,153,344
Surplus/(deficit) and total comprehensive income/(loss) for the financial year		1,729,249	(971,487)	757,762	1,696,419

The accompanying notes form an integral part of these financial statements.

BRIGHT HILL EVERGREEN HOME
(Registered in Singapore under the Societies Act)

BALANCE SHEET
At 31 March 2020

	Note	2020 \$	2019 \$
Non-current asset			
Property, plant and equipment	6	1,900,580	941,625
Current assets			
Bank and cash balances	7	6,224,827	7,169,840
Fixed deposits	8	19,000,000	17,000,000
Trade and other receivables	9	1,169,277	1,141,246
		26,394,104	25,311,086
Total assets		28,294,684	26,252,711
Non-current liabilities			
Lease liabilities	10	432,362	–
Current liabilities			
Deferred grant		167,994	–
Trade and other payables	11	1,402,009	1,207,733
Contract liabilities - resident's accounts		360,894	328,825
Lease liabilities	10	457,510	–
		2,388,407	1,536,558
Total liabilities		2,820,769	1,536,558
Net assets		25,473,915	24,716,153
Unrestricted funds			
General Fund		13,825,761	12,096,512
Designated funds			
Capacity Expansion Fund	12	7,000,000	7,000,000
Capability Building Fund	13	1,860,000	1,860,000
Restricted funds			
Community Silver Trust Fund	14	2,627,224	3,598,711
Designated Donation Fund	15	160,930	160,930
		25,473,915	24,716,153

The accompanying notes form an integral part of these financial statements.

BRIGHT HILL EVERGREEN HOME
(Registered in Singapore under the Societies Act)

STATEMENT OF CHANGES IN FUNDS
For the financial year ended 31 March 2020

	← Unrestricted funds →			← Restricted funds →		Total funds \$
	General Fund \$	Capacity Expansion Fund \$	Capability Building Fund \$	Community Silver Trust Fund \$	Designated Donation Fund \$	
Balance at 1.4.2018	10,132,140	7,000,000	1,860,000	3,866,664	160,930	23,019,734
Surplus/(deficit) and total comprehensive income/(loss) for the financial year	1,964,372	–	–	(267,953)	–	1,696,419
Balance at 31.3.2019	12,096,512	7,000,000	1,860,000	3,598,711	160,930	24,716,153
Surplus/(deficit) and total comprehensive income/(loss) for the financial year	1,729,249	–	–	(971,487)	–	757,762
Balance at 31.3.2020	13,825,761	7,000,000	1,860,000	2,627,224	160,930	25,473,915

The accompanying notes form an integral part of these financial statements.

BRIGHT HILL EVERGREEN HOME
(Registered in Singapore under the Societies Act)

STATEMENT OF CASH FLOWS
For the financial year ended 31 March 2020

	2020 \$	2019 \$
Cash flows from operating activities		
Surplus for the year	757,762	1,696,419
Adjustments for:		
Depreciation of property, plant and equipment	793,348	344,448
Loss on disposal of property, plant and equipment	–	29,189
Interest income	(328,736)	(233,862)
Interest expense on lease liabilities	36,374	–
Property, plant and equipment written off	698	18,952
Operating cash flows before movements in working capital	1,259,446	1,855,146
Trade and other receivables	87	(420,494)
Trade and other payables	194,276	(132,330)
Deferred grant	167,994	–
Contract liabilities - residents' accounts	32,069	17,790
Net cash from operating activities	1,653,872	1,320,112
Cash flows from investing activities		
Interest received	300,618	187,967
Purchases of property, plant and equipment	(420,079)	(307,541)
Proceeds from disposal of property, plant and equipment	–	1,000
Net cash used in investing activities	(119,461)	(118,574)
Cash flows from financing activities		
Repayment of lease liabilities	(443,050)	–
Interest paid	(36,374)	–
Net cash used in financing activities	(479,424)	–
Net increase in cash and cash equivalents	1,054,987	1,201,538
Cash and cash equivalents at beginning of financial year	24,169,840	22,968,302
Cash and cash equivalents at end of financial year	25,224,827	24,169,840
Cash and cash equivalents comprise:		
Bank and cash balances (Note 7)	6,224,827	7,169,840
Fixed deposits (Note 8)	19,000,000	17,000,000
	25,224,827	24,169,840

The accompanying notes form an integral part of these financial statements.

BRIGHT HILL EVERGREEN HOME
(Registered in Singapore under the Societies Act)

NOTES TO THE FINANCIAL STATEMENTS
For the financial year ended 31 March 2020

These notes form an integral part of and should be read in conjunction with the accompanying financial statements.

1. General information

Bright Hill Evergreen Home (the “Home”) is registered with the Registry of Societies under Societies Act, Chapter 311 in Singapore on 24 May 1982. The Home's registered address and principal place of business is at 100 Punggol Field, Singapore 828811.

The principal activities of the Home are those of provide standard nursing care to the residents, therapy activities by Occupational therapist and Physiotherapist and social activities such as in-house party, outings, entertainment, games organised by volunteers.

The objectives of the Home are to provide and maintain quality care to the residents and discharge them to the community when appropriate.

The Home is a charity registered under the Charities Act since 2 April 1987. It has been granted an Institution of a Public Character (“IPC”) status for the period from 1 December 2015 to 30 November 2017 and was renewed for another period from 1 December 2017 to 30 November 2020. The National Council of Social Service (“NCSS”), which is itself a gazetted IPC, has approved the Home to be a member of the NCSS-managed Central Fund Registry since 15 June 1993. As a result, all cash contributions to the Home are tax deductible to the donors and the Home is eligible for tax exemption under Section 13M (2)(b) of the Singapore Income Tax Act.

2. Summary of significant accounting policies

a) Basis of preparation

The financial statements, expressed in Singapore dollar (“\$”) which is the functional currency of the Home, have been prepared in accordance with the Societies Act, Chapter 311, Charities Act, Chapter 37 and other relevant regulations and Financial Reporting Standards in Singapore (“FRSs”). The financial statements have been prepared under the historical cost convention except as disclosed in the accounting policies below.

The preparation of financial statements in conformity with FRSs requires the use of estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the financial year. Although these estimates are based on the Management Committee’s best knowledge of current events and actions and historical experiences and various other factors that are believed to be reasonable under the circumstances, actual results may ultimately differ from those estimates.

Use of estimates and judgements

The estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognised in the period in which the estimate is revised if the revision affects only that period, or in the period of the revision and future periods if the revision affects both current and future periods.

2. Summary of significant accounting policies (cont'd)

a) Basis of preparation (cont'd)

Use of estimates and judgements (cont'd)

The areas involving a higher degree of judgement in applying accounting policies, or areas where assumptions and estimates have a significant risk of resulting in material adjustment within the next financial year are disclosed in Note 3.

The carrying amounts of bank and cash balances, fixed deposits, trade and other current receivables and payables approximate their respective fair values due to the relatively short-term maturity of these financial instruments.

New and revised standards

In the current financial year, the Home has adopted all the new and revised FRSs and Interpretations of FRSs ("INT FRSs") that are relevant to its operations and effective for the current financial year. Changes to the Home's accounting policies have been made as required, in accordance with the transitional provisions in the respective FRSs and INT FRSs.

The adoption of these new and revised FRSs and INT FRSs did not have any material effect on the financial results or position of the Home except as disclosed below:

FRS 116 Leases

When the Home is the lessee:

FRS 116 replaces the existing FRS 17 *Leases* for the financial period beginning 1 January 2019. It reforms lessee accounting by introducing a single lessee accounting model. Lessees are required to recognise all leases on their balance sheets to reflect their rights to use leased assets (a "right-of-use" asset) and the associated obligations for lease payments (a lease liability), with limited exemptions for short-term leases (less than 12 months) and leases of low value items. In addition, the nature of expenses related to those leases will change as FRS 116 replaces the straight-line operating lease expense with depreciation charge of right-of-use asset and interest expense on lease liability.

On adoption of FRS 116, the Home recognised lease liabilities in relation to leases which had previously been classified as "Operating Leases" under FRS 17 *Leases*. These liabilities were measured at the present value of the remaining lease payments, discounted using the Home's incremental borrowing rate as at 1 April 2019. The lessee's incremental borrowing rate applied to the lease liabilities on 1 April 2019 was 3.27% per annum.

	\$
Operating lease commitments disclosed as at 31 March 2019 (Note 17)	1,521,552
Low value assets	(25,350)
Discounted using the lessee's incremental borrowing rate	(65,398)
Others (Non-claimable GST)	(97,882)
	<hr/>
Lease liabilities recognised under FRS 116 at 1 April 2019	1,332,922
	<hr/>

The associated right-of-use assets were measured at the amount equal to the lease liability (adjusted for any prepaid or accrued lease payment) on adoption. Arising from the adoption of FRS 116, right-of-use asset and lease liability of \$1,332,922 were recognised on the balance sheet on 1 April 2019.

2. Summary of significant accounting policies (cont'd)

a) Basis of preparation (cont'd)

FRS 116 Leases (cont'd)

When the Home is the lessee (cont'd)

In applying FRS 116 for the first time, the Home has used the following practical expedients permitted by the standard:

- account for operating leases with a remaining lease term of less than 12 months as at 1 April 2019 as short-term leases;
- exclude initial direct costs for the measurement of the right-of-use asset at the date of initial application; and
- use of hindsight in determining the lease term where the contract contains options to extend or terminate the lease.

New standards, amendments to standards and interpretations that have been issued at the balance sheet date but are not yet effective for the financial year ended 31 March 2020 have not been applied in preparing these financial statements. None of these are expected to have a significant effect on the financial statements of the Home.

b) Income recognition

Programme fees

The Home provides resident services for patients with high dependency on nursing care for their daily activities. Programme fees are recognised as income over time as the Home provides the services. The Home has the right to the fees from the patients in an amount that corresponds directly with the provision of services.

Donations

Donations are recognised when received. If donations are received for a specific fund-raising or charity event and the event has not occurred, the donation received will be deferred as a contract liability until the event has been conducted.

Interest income

Interest income is recognised on a time proportion basis using the effective interest method.

c) Government grants

Government grants are recognised at their fair value where there is reasonable assurance that the grant will be received and all attaching conditions will be complied with.

Subventions and grants

Subventions and grants from government and other organisations are recognised as income only when there is sufficient evidence that the Home has complied with the conditions attached to them and there is reasonable certainty that they will be received. These subventions and grants are recognised on an accrual basis. Additionally, subventions and grants recognised in the statement of comprehensive income are calculated based on the funding principles set by the individual organisations. Adjustments to the subventions and grants which are made on finalisation by the relevant organisations are recognised in the statement of comprehensive income in the financial year in which they are finalised.

2. Summary of significant accounting policies (cont'd)

c) Government grants (cont'd)

Subventions and grants with specific conditions are recognised either when they have been conformed to, or when there is sufficient evidence that they will be met. In instances where there is uncertainty about the ability of the Home to meet the conditions set by grantors, the recognitions of the grants as income is deferred until conditions imposed at the time of the grants can be complied with.

Capital grants

Where the grant relates to an asset, the fair value is recognised as deferred capital grant on the balance sheet and is amortised to respective Home's fund over the expected useful life of the relevant asset by equal annual instalments.

d) Leases

The accounting policy for leases before 1 April 2019 are as follows:

When the Home is the lessee

Operating leases

Leases where a significant portion of the risks and rewards incidental to ownership are retained by the lessor are classified as operating leases. Payments made under operating leases (net of any incentives received from the lessor) are recognised in income or expenditure on a straight-line basis over the period of the lease. Contingent rents, if any, are charged as expenses in the periods in which they are incurred.

When an operating lease is terminated before the lease period expires, any payment required to be made to the lessor by way of penalty is recognised as an expense in the period in which termination takes place.

The accounting policy for leases after 1 April 2019 are as follows:

The Home assesses at contract inception whether a contract is, or contains, a lease. That is, if the contract conveys the right to control the use of an identified asset for a period of time in exchange for consideration.

When the Home is the lessee

The Home applies a single recognition and measurement approach for all contracts that are, or contain, a lease, except for short-term leases (i.e. for leases that have a lease term of 12 months or less from the commencement date and do not contain a purchase option) and leases of low-value assets (e.g. leases of tablet and personal computers, small items of office equipment and telephones). For these exempted leases, the Home recognises the lease payments as an operating expense on a straight-line basis over the term of the lease unless another systematic basis is more representative of the time pattern in which economic benefits from the leased assets are consumed.

Lease liabilities

The lease liability is initially measured at the present value of the lease payments that are not paid at the commencement date, discounted by using the rate implicit in the lease. If this rate cannot be readily determined, the Home uses its incremental borrowing rate.

2. Summary of significant accounting policies (cont'd)

d) Leases (cont'd)

The accounting policy for leases after 1 April 2019 are as follows (cont'd):

When the Home is the lessee (cont'd)

Lease liabilities (cont'd)

Lease payments included in the measurement of the lease liability comprise fixed lease payments (including in-substance fixed payments) less any lease incentives receivable, variable lease payments that depend on an index or a rate, and amounts expected to be paid under residual value guarantees. The lease payments also include the exercise price of a purchase option reasonably certain to be exercised by the Home and payments of penalties for terminating the lease, if the lease term reflects the Home exercising the option to terminate. Variable lease payments that do not depend on an index or a rate are recognised as expenses (unless they are incurred to produce inventories) in the period in which the event or condition that triggers the payment occurs.

The lease liability is presented as a separate line in the balance sheet.

The lease liability is subsequently measured by increasing the carrying amount to reflect interest on the lease liability using the effective interest method, and reducing the carrying amount to reflect the lease payments made.

The Home remeasures the lease liability (and makes a corresponding adjustment to the related right-of-use asset) whenever there is a modification, a change in the lease term, a change in the lease payments (e.g., changes to future payments resulting from a change in an index or rate used to determine such lease payments) or a change in the assessment of an option to purchase the underlying asset.

Right-of-use assets

The Home recognises right-of-use assets at the commencement date of the lease (i.e., the date the underlying asset is available for use). The right-of-use assets comprise the initial measurement of the corresponding lease liability, lease payments made at or before the commencement date, initial direct cost, less any lease incentive received.

Whenever the Home incurs an obligation for costs to dismantle and remove a leased asset, restore the site on which it is located or restore the underlying asset to the condition required by the terms and conditions of the lease, a provision is recognised and measured under FRS 37 *Provisions, Contingent Liabilities and Contingent Assets*. To the extent that the cost relates to a right-of-use asset, the costs are included in the related right-of-use asset, unless those costs are incurred to produce inventories.

Right-of-use assets are subsequently measured at cost, less any accumulated depreciation and impairment losses, and adjusted for any remeasurement of lease liabilities. Right-of-use assets are depreciated on a straight-line basis over the shorter period of the lease term and useful life of the underlying asset. If ownership of the leased asset transfers to the Home at the end of the lease term or the cost reflects the exercise of a purchase option, depreciation is calculated using the estimated useful life of the asset. The depreciation starts at the commencement date of the lease.

The right-of-use assets are presented within "property, plant and equipment" in the balance sheet.

The Home applies FRS 36 *Impairment of Assets* to determine whether a right-of-use asset is impaired and accounts for any identified impairment loss as described in Note 2(h).

As a practical expedient, FRS 116 *Leases* permits a lessee not to separate non-lease components, and instead account for any lease and associated non-lease component as a single arrangement. The Home has not used this practical expedient.

2. Summary of significant accounting policies (cont'd)

e) Employee benefits

Defined contribution plans

The Home contributes to the Central Provident Fund ("CPF"), a defined contribution plan regulated and managed by the Singapore Government. The Home's contributions to CPF are charged to income or expenditure in the period in which the related service is performed.

Employee leave entitlement

Employee entitlements to annual leave are recognised when they accrue to employees. A provision is made for the estimated liability for annual leave as a result of services rendered by employees up to the balance sheet date.

f) Income tax

The Home is a registered charity under the Charities Act and is exempted from income tax under the provisions of the Income Tax Act.

g) Property, plant and equipment

Property, plant and equipment are initially recognised at cost and subsequently carried at cost less accumulated depreciation and any impairment in value.

The cost of property, plant and equipment initially recognised includes its purchase price and any cost that is directly attributable to bringing the asset to the location and condition necessary for it to be capable of operating in the manner intended by management.

Property, plant and equipment are depreciated on a straight-line basis to write off the cost of property, plant and equipment over their estimated useful lives. The estimated useful lives are as follows:

	Years
Furniture and fittings	6 $\frac{2}{3}$
Equipment	2 to 4
Motor vehicle	5
Building renovation	6 $\frac{2}{3}$
Leasehold building	2 $\frac{9}{10}$

Fully depreciated assets are retained in the financial statements until they are no longer in use.

On disposal of a property, plant and equipment, the difference between the net disposal proceeds and its carrying amount is taken to income or expenditure.

Depreciation of relevant property, plant and equipment that are funded in part by government capital grants are charged to the Community Silver Trust Fund account.

2. Summary of significant accounting policies (cont'd)

h) Impairment of non-financial assets

At each balance sheet date, the Home assesses the carrying amounts of its non-financial assets to determine whether there is any indication that those assets have suffered an impairment loss. If such indication exists, the recoverable amount of the asset is estimated in order to determine the extent of the impairment loss, if any. Where it is not possible to estimate the recoverable amount of an individual asset, the Home estimates the recoverable amount of the cash-generating unit to which the asset belongs.

Recoverable amount is the higher of fair value less costs of disposal and value in use. In assessing value in use, the estimated future cash flows are discounted to their present value using a pre-tax discount rate that reflects current market assessments of the time value of money and the risks specific to the asset.

If the recoverable amount of an asset (or cash-generating unit) is estimated to be less than its carrying amount, the carrying amount of the asset (cash-generating unit) is reduced to its recoverable amount. An impairment loss is recognised immediately in income or expenditure.

Where an impairment loss subsequently reverses, the carrying amount of the asset (cash-generating unit) is increased to the revised estimate of its recoverable amount, but so that the increased carrying amount does not exceed the carrying amount that would have been determined had no impairment loss been recognised for the asset (cash-generating unit) in prior years. A previously recognised impairment loss for an asset other than goodwill is only reversed if there has been a change in the estimates used to determine the asset's recoverable amount since the last impairment loss was recognised. A reversal of an impairment loss is recognised immediately in profit or loss.

i) Financial assets

Recognition and derecognition

Regular purchases and sales of financial assets are recognised on trade-date - the date on which the Home commits to purchase or sell the asset. Financial assets are derecognised when the rights to receive cash flows from the financial assets have expired or have been transferred and the Home has transferred substantially all risks and rewards of ownership.

Financial assets are initially measured at fair value. Transaction costs that are directly attributable to the acquisition of financial assets are added to the fair value of the financial assets on initial recognition. Trade receivables without a significant financing component is initially measured at transaction prices.

Classification and measurement

All financial assets are subsequently measured in their entirety at either amortised cost or fair value, depending on the classification of the financial assets. The Home classifies its financial assets based on the Home's business model for managing the financial assets and the contractual cash flow characteristics of the financial assets. The Home's financial assets are classified at amortised cost which comprise trade and other receivables (excluding prepayments), fixed deposits and bank and cash balances on the balance sheet.

Subsequent measurement

Financial assets at amortised cost are subsequently measured using the effective interest rate ("EIR") method and are subject to impairment. Gains and losses are recognised in income or expenditure when the asset is derecognised, modified or impaired. Interest income from these financial assets is included in interest income using the EIR method.

2. Summary of significant accounting policies (cont'd)

i) Financial assets (cont'd)

Impairment

The Home recognises an allowance for expected credit losses (“ECLs”) for financial assets carried at amortised cost. ECLs are based on the difference between the contractual cash flows due in accordance with the contract and all the cash flows that the Home expects to receive, discounted at an approximation of the original effective interest rate.

The impairment methodology applied depends on whether there has been a significant increase in credit risk. For credit exposures for which there has not been a significant increase in credit risk since initial recognition, ECLs are provided for credit losses that result from default events that are possible within the next 12-months (a “12-month ECL”). For those credit exposures for which there has been a significant increase in credit risk since initial recognition, a loss allowance is required for credit losses expected over the remaining life of the exposure, irrespective of the timing of the default (a “lifetime ECL”).

For trade receivables that do not have a significant financing component, the Home applies a simplified approach to recognise a loss allowance based on lifetime ECLs at each reporting date. The Home has established a provision matrix that is based on its historical credit loss experience, adjusted as appropriate for current conditions and forward-looking factors specific to the debtors and the economic environment.

If the Home has measured the loss allowance for a financial asset at an amount equal to lifetime ECL in the previous reporting period, but determines at the current balance sheet date that the conditions for lifetime ECL are no longer met, the Home measures the loss allowance at an amount equal to 12-month ECL at the current balance sheet date.

The Home recognises an impairment gain or loss in income or expenditure for all financial assets with a corresponding adjustment to their carrying amount through a loss allowance account.

j) Financial liabilities

Financial liabilities include trade and other payables (excluding GST payables and provision for unutilised annual leave) and lease liabilities. Financial liabilities are recognised on the balance sheet when, and only when, the Home becomes a party to the contractual provisions of the financial instruments.

Financial liabilities are initially recognised at fair value plus directly attributable transaction costs, and are subsequently measured at amortised cost, using the effective interest method.

A financial liability is derecognised when the obligation under the liability is extinguished. Gains and losses are recognised in income or expenditure when the liabilities are derecognised and through the amortisation process.

k) Provisions

Provisions are recognised when the Home has a present legal or constructive obligation as a result of past event, and it is probable that an outflow of economic resources will be required to settle the obligation and the amount can be estimated reliably. Provisions are measured at the management’s best estimate of the expenditure required to settle the obligation at the balance sheet date. Where the effect of the time value of money is material, the amount of the provision shall be discounted to present value using a pre-tax discount rate that reflects the current market assessment of the time value of money and risks specific to the obligation.

When discounting is used, the increase in the provision due to passage of time is recognised as a finance cost in income or expenditure.

2. Summary of significant accounting policies (cont'd)

l) Funds

Unless specifically indicated, fund balances are not represented by any specific assets, but are represented by all assets of the Home. Income and expenditure relating to various funds specifically set up are taken directly to these funds. All other income and expenditure are reflected in the general fund.

m) Cash and cash equivalents

For the purpose of presentation in the statement of cash flows, cash and cash equivalents comprise cash on hand and deposits with financial institutions which are subject to an insignificant risk of change in value.

3. Critical accounting judgement and key sources of estimation uncertainty

In the process of applying the Home's accounting policies, which are described in Note 2, management has made the following judgements that have the most significant effect on the amounts recognised in the financial statements (apart from those involving estimations):

Critical judgements in applying the Home's accounting policies

Determination of control in Medical Endowment Fund

The Home holds a Medifund bank account of \$12,018 (2019: \$432,280) that is not recognised in the financial statements of the Home. The Home has set up a Medifund Committee to evaluate and approve residents' Medifund applications. The Medifund Committee must comprise of not more than one member who are part of the Home's management or staff. Any nomination of committee members will need to be approved by Ministry of Health ("MOH"). As at 31 March 2020, there are five (2019: four) committee members appointed, out of which majority are independent. The monies are held in trust and administered by the Home as part of the Medical Endowment Scheme. As per the Medifund Guidelines, it shall be deemed not to form part of the Home's assets (Note 7).

Reinstatement cost of leasehold building

In accordance with the terms of the building lease agreement, upon expiry of the lease, the Home is required to deliver to the landlord vacant possession of the building together with the approved building work and fixtures and fittings in tenantable condition.

The Home's Board is of the view that the likelihood to reinstate the building is low due to the nature of the Home's operation. No provision has been made in the financial statements. The carrying amount of the leasehold building as at 31 March 2020 is \$875,920 (Note 6).

3. Critical accounting judgement and key sources of estimation uncertainty (cont'd)

Key sources of estimation uncertainty

The key assumptions concerning the future, and other key sources of estimation uncertainty at the balance sheet date, that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next financial year are discussed below:

Property, plant and equipment

The Home reviews the useful lives and residual values of property, plant and equipment at each balance sheet date in accordance with the accounting policy in Note 2(g). The estimation of the useful lives and residual values involve assumption concerning the future and estimation of the assets' common life expectancies and expected level of usage.

The net carrying amount of property, plant and equipment at 31 March 2020 and the annual depreciation charge for the financial year ended 31 March 2020 are disclosed in Note 6.

Any changes in the expected useful lives and residual values of these assets would affect the net carrying amount of property, plant and equipment and the depreciation charge for the financial year.

Estimating the incremental borrowing rate for leases

The Home uses the incremental borrowing rate to measure the lease liabilities because the interest rate implicit in the lease is not readily determinable. The incremental borrowing rate is the rate of interest that a lessee would have to pay to borrow over a similar term, and with a similar security, the funds necessary to obtain an asset of a similar value to the right-of-use asset in a similar economic environment. The incremental borrowing rate therefore reflects what would the Home "would have to pay", which requires estimation when no observable rates are available or when they need to be adjusted to reflect the terms and conditions of the lease. The Home estimates the incremental borrowing rate using observable inputs such as market interest rates, when available and is required to make certain entity-specific estimates. Any change in estimation of incremental borrowing rate may have a significant impact to the determination of lease liabilities and right-of-use asset at commencement date of new leasing transactions. The carrying amounts of lease liabilities and right-of-use assets are disclosed in Notes 10 and 6 respectively.

4. Donations

The donations received during the financial year are as follows:

	2020	2019
	\$	\$
Donations - Tax exempt	214,879	395,181
Donations - Non-tax exempt	144,319	118,628
	359,198	513,809
Donations are received as follows:		
Voluntary income	331,221	497,862
Donations - Solicited (fundraising event)	27,977	15,947
	359,198	513,809

5. Staff costs

	2020	2019
	\$	\$
Accommodation expenses	58,388	46,352
Salaries and bonuses	3,767,382	3,533,334
CPF contributions	289,622	295,332
Foreign worker levy	478,073	471,123
Medical expenses	37,210	33,183
Staff training	44,872	46,870
Staff welfare	134,334	123,020
Gratuities	189,263	154,662
	<u>4,999,144</u>	<u>4,703,876</u>

The staff costs were allocated as follows:

Cost of charitable activities	3,339,192	3,092,184
Governance and other administrative costs	1,659,952	1,611,692
	<u>4,999,144</u>	<u>4,703,876</u>

There is no paid staff who are close members of the family of the key management personnel or Management Committee.

In compliance with the Code of Governance for Charities and Institutions of a Public Character, the annual remuneration of the Home's three highest paid staff, who each receives remuneration exceeding \$100,000, fall into the following bands:

	Number of staff	
	2020	2019
Between \$200,001 to \$300,000	1	1
Between \$100,000 to \$200,000	2	2
	<u> </u>	<u> </u>

6. Property, plant and equipment

	Furniture and fittings \$	Equipment \$	Motor vehicles \$	Building renovation \$	Leasehold building \$	Total \$
2020						
Cost						
At 1.4.2019	1,024,404	1,049,936	224,530	721,089	–	3,019,959
Recognition of right-of-use assets on initial application of FRS 116 (Note 10)	–	–	–	–	1,332,922	1,332,922
At 1.4.2019, restated	1,024,404	1,049,936	224,530	721,089	1,332,922	4,352,881
Additions	3,050	306,489	–	110,540	–	420,079
Written off	(7,386)	(38,559)	–	–	–	(45,945)
Disposal	–	(449)	–	–	–	(449)
Balance at 31.3.2020	1,020,068	1,317,417	224,530	831,629	1,332,922	4,726,566
Accumulated depreciation						
At 1.4.2019	613,906	932,055	212,651	319,722	–	2,078,334
Recognition of right-of-use assets on initial application of FRS 116 (Note 10)	–	–	–	–	–	–
At 1.4.2019, restated	613,906	932,055	212,651	319,722	–	2,078,334
Depreciation charge	121,889	90,147	11,879	112,431	457,002	793,348
Written off	(6,688)	(38,559)	–	–	–	(45,247)
Disposal	–	(449)	–	–	–	(449)
Balance at 31.3.2020	729,107	983,194	224,530	432,153	457,002	2,825,986
Net carrying value						
At 31.3.2020	290,961	334,223	–	399,476	875,920	1,900,580

Included in property, plant and equipment are right-of-use assets of \$875,920 (1.4.2019: \$1,332,922).

6. Property, plant and equipment (cont'd)

	Furniture and fittings \$	Equipment \$	Motor vehicles \$	Building renovation \$	Leasehold building \$	Total \$
2019						
Cost						
Balance at 1.4.2018	1,134,122	1,042,470	224,530	721,089	–	3,122,211
Additions	236,408	71,133	–	–	–	307,541
Written off	(112,754)	(18,669)	–	–	–	(131,423)
Disposal	(233,372)	(44,998)	–	–	–	(278,370)
Balance at 31.3.2019	1,024,404	1,049,936	224,530	721,089	–	3,019,959
Accumulated depreciation						
Balance at 1.4.2018	746,948	951,815	184,216	211,559	–	2,094,538
Depreciation charge	164,574	43,276	28,435	108,163	–	344,448
Written off	(93,824)	(18,647)	–	–	–	(112,471)
Disposal	(203,792)	(44,389)	–	–	–	(248,181)
Balance at 31.3.2019	613,906	932,055	212,651	319,722	–	2,078,334
Net carrying value At 31.3.2019	410,498	117,881	11,879	401,367	–	941,625

7. Bank and cash balances

	2020 \$	2019 \$
Cash on hand	4,500	4,500
Cash in bank	6,220,327	7,165,340
	6,224,827	7,169,840

Cash on hand and in bank includes an amount of \$360,894 (2019: \$328,825) held in trust on behalf of the residents of the Home in a designated bank account.

The Home also holds a Medifund bank account of \$12,018 (2019: \$432,280) that is not recognised in the financial statements of the Home. The monies are held in trust and administered by the Home as part of the Medical Endowment Scheme and shall be deemed not to form part of the Home's asset as per the Medifund Guidelines (Note 3).

8. Fixed deposits

The fixed deposits are placed with reputable financial institutions on varying maturities and interest rate terms. The effective interest rates of these fixed deposits ranging from 1.15% to 2.00% (2019: 1.18% to 1.95%) per annum at the balance sheet date.

9. Trade and other receivables

	2020 \$	2019 \$
Trade receivables	432,410	409,272
Less: Allowance for expected credit loss (Note 18)	(10,859)	(10,859)
	421,551	398,413
Deposits	191,141	253,782
Interest receivables	176,346	148,228
Prepayments	97,787	15,582
Other receivables	76,918	290,401
Grant receivables	167,994	–
GST subvention receivables	37,540	34,840
	1,169,277	1,141,246

10. Lease liabilities

	2020 \$	2019 \$
Current	457,510	–
Non-current	432,362	–
	889,872	–

The Home as a lessee**Nature of the Home's leasing activities**

- i) The Home leases home premises and staff accommodation from non-related parties. The leases have an average tenure of between 1.5 to 3 years;
- ii) The Home made monthly lease payments for a 3 years leasehold home premises. The right-of-use of the home premises is classified as right-of-use asset; and
- iii) In addition, the Home leases staff accommodation with contractual terms of 1.5 years. This lease with low value asset is accounted for as low-value lease. The Home has elected not to recognise right-of-use asset and lease liability for this lease.

The maturity analysis of the lease liabilities is disclosed in Note 18(b).

Information about leases for which the Home is a lessee is presented below:

Carrying amount of right-of-use assets

	31.3.2020 \$	1.4.2019 \$
<u>Classified within property, plant and equipment</u>		
Leasehold building	875,920	1,332,922

10. Lease liabilities (cont'd)**The Home as a lessee (cont'd)****Amounts recognised in income or expenditure**

	2020
	\$
<u>Depreciation charge for the year (Note 6)</u>	
Leasehold building	457,002
	<hr/>
<u>Lease expense not included in the measurement of lease liabilities</u>	
Low-value lease	23,400
	<hr/>
Interest expense on lease liabilities	36,374
	<hr/>

Total cash flows for leases amounted to \$502,824.

Reconciliation of movements of lease liabilities to cash flows arising from financing activities:

	Lease liabilities
	\$
Balance at 1 April 2019	–
Adoption of FRS 116	1,332,922
Changes from financing cash flows:	
- Repayments	(443,050)
- Interest paid	(36,374)
	<hr/>
	(479,424)
Non-cash changes:	
- Interest expense	36,374
	<hr/>
Balance at 31 March 2020	889,872
	<hr/>

11. Trade and other payables

	2020	2019
	\$	\$
Trade payables	352,140	500,900
Accruals	372,495	353,977
Other payables	462,163	158,933
GST payables	27,951	24,059
Provision for unutilised annual leave	129,796	119,622
Residents' deposits	57,464	50,242
	<hr/>	<hr/>
	1,402,009	1,207,733
	<hr/>	<hr/>

12. Capacity Expansion Fund

The Capacity Expansion Fund was established in the financial year ended 31 March 2014 by transferring \$7,000,000 from the General Fund. The objective of the fund is to finance capital expenditure of the Home such as building development, furniture and fittings, office equipment, as well as any relevant operating expenses.

13. Capability Building Fund

The Capability Building Fund was established in the financial year ended 31 March 2014 by transferring \$1,860,000 from the General Fund. The objective of the fund is to invest in increasing capability of the Home's medical and therapy services, patient care equipment and human resource development to provide better services in future.

14. Community Silver Trust Fund

	2020 \$	2019 \$
At 1 April	3,598,711	3,866,664
Grant received during the financial year	478,898	640,591
Disbursement during the financial year	(1,450,385)	(908,544)
Deficit during the financial year	(971,487)	(267,953)
At 31 March	2,627,224	3,598,711

Community Silver Trust ("CST") is a matching grant of one dollar for every donation dollar raised by eligible organisations with proper governance and whose programmes are aligned with the Government's long-term vision for the Intermediate and Long-Term Care ("ILTC") sector, which will be provided by the CST.

The CST is managed by the Ministry of Health ("MOH") on behalf of the Trustees, which is a restricted fund.

The objective of the CST is to encourage donations and provide additional resources for the service providers in the ILTC sector to enhance their capabilities, provide value-added services to achieve higher quality care, and enhance the affordability of step-down care for service users and patients.

15. Designated Donation Fund

The Designated Donation Fund comprised designated donations received, which have not been fully utilised for designated purposes specified by donors.

16. Remuneration of key management personnel

The remuneration of key management personnel during the financial year is as follows:

	2020 \$	2019 \$
Salaries and related costs	320,827	316,644
CPF contributions	29,981	33,833
	<u>350,808</u>	<u>350,477</u>

Key management personnel are the Chief Executive Officer and the direct reporting senior officers. The Management Committee did not receive any compensation during the financial year.

17. Operating lease commitments

As at 31 March 2019, commitments in relation to non-cancellable operating leases contracted for at the balance sheet date, but not recognised as liabilities, are as follows:

	2019 \$
Not later than one financial year	536,384
Later than one financial year but not later than five financial years	985,168
	<u>1,521,552</u>

As disclosed in Note 2(a), the Home has adopted FRS 116 on 1 April 2019. These lease payments have been recognised as right-of-use assets and lease liabilities on the balance sheet as at 1 April 2019.

18. Financial instruments**a) Categories of financial instruments**

Financial instruments at their carrying amounts at the balance sheet date are as follows:

	2020 \$	2019 \$
<i>Financial assets</i>		
Financial assets at amortised cost	<u>26,296,317</u>	<u>25,295,504</u>
<i>Financial liabilities</i>		
Financial liabilities at amortised cost	<u>2,134,134</u>	<u>1,064,052</u>

18. Financial instruments (cont'd)**b) Financial risk management**

The Home is exposed to financial risks arising from its operations and the use of financial instruments. The key financial risks include interest rate risk, credit risk and liquidity risk. The Home is not exposed to foreign exchange risk as the Home transacts substantially in its functional currency. The policies for managing each of these risks are summarised below. The Management Committee reviews and agrees policies and procedures for the management of these risks.

There has been no change to the Home's exposure to these financial risks or the manner in which it manages and measures financial risk.

Interest rate risk

The Home's exposure to the risk of changes in interest rates arises mainly from the bank balances (Note 7) and fixed deposits (Note 8) placed with reputable financial institutions. For interest income from the fixed deposits, the Home managed the interest rate risks by placing fixed deposits with reputable financial institutions on varying maturities and interest rate terms. The sensitivity analysis for changes in interest rate is not disclosed as the effect on income or expenditure is not significant.

Liquidity risk

Liquidity risk is the risk that the Home will encounter difficulty in meeting its financial obligations due to shortage of funds. The Home's exposure to liquidity risk arises primarily from mismatches of the maturities of financial assets and liabilities

In the management of liquidity risk, the Home monitors and maintains a level of cash and cash equivalents deemed adequate by the Management Committee to finance the Home's operations and mitigate the effects of fluctuation in cash flows.

The table below summarises the maturity profile of the Home's non-derivative financial liabilities at the balance sheet date based on contractual undiscounted repayment obligations:

	Within 1 year \$	2 to 5 years \$	Total \$
2020			
Trade and other payables	1,244,262	–	1,244,262
Lease liabilities	479,424	439,472	918,896
	1,723,686	439,472	2,163,158
2019			
Trade and other payables	1,064,052	–	1,064,052

18. Financial instruments (cont'd)

b) Financial risk management (cont'd)

Credit risk

Credit risk is the risk of loss that may arise on outstanding financial instruments should a counterparty default on its obligations. The Home's exposure to credit risk arises primarily from cash and cash equivalents and trade and other receivables. For financial assets, including cash and cash equivalents, the Home minimises credit risk by dealing exclusively with high credit rating counterparties.

The Home does not have any significant concentration of credit risk exposure. The maximum exposure to credit risk is represented by the carrying value of each class of financial assets recognised on the balance sheet.

The Home's exposure to credit risk arises from the failure of a resident to settle its financial and contractual obligations to the Home, as and when they fall due. The Management Committee manages this risk by limiting the aggregate financial exposure to any individual resident.

The following sets out the Home's internal credit evaluation practices and basis for recognition and measurement of expected credit losses ("ECL"):

Description of evaluation of financial assets	Basis for recognition and measurement of ECL
Counterparty has a low risk of default and does not have any past due amounts	12-month ECL
Contractual payments are more than 30 days past due or where there has been a significant increase in credit risk since initial recognition	Lifetime ECL - not credit-impaired
Contractual payments are more than 90 days past due or there is evidence of credit impairment	Lifetime ECL - credit-impaired
There is evidence indicating that the Home has no reasonable expectation of recovery of payments such as when the debtor has been placed under liquidation or has entered into bankruptcy proceedings	Write-off

The Home determines the ECL of amounts due from residents by making debtor-specific assessment of expected impairment loss for overdue amounts due from residents and using a provision matrix for amounts due from residents that is based on its historical credit loss experience, past due status of residents, residents' ability to pay and forward-looking information specific to the residents and economic environment.

The Home considers that default has occurred when the resident fails to make contractual payments more than 90 days past due. A resident outstanding balance is written off when there is information indicating that there is no realistic prospect of recovery from the resident.

18. Financial instruments (cont'd)**b) Financial risk management (cont'd)*****Credit risk (cont'd)***

There has been no change in the estimation techniques or significant assumptions made during the current financial year.

Based on a simplified approach for determining credit loss allowance for amounts due from residents at the balance sheet date, an allowance for impairment amounting to \$10,859 (2019: \$10,859) was recognised by the Home as at 31 March 2020 and 31 March 2019 for specific residents as a result of occurrence of credit impairment events.

Movements in credit loss allowance for impairment on amounts due from residents are as follows:

	2020 \$	2019 \$
At 1 April	10,859	11,080
Loss allowance recognised in income or expenditure during the financial year on:		
Receivables written off as uncollectable	–	(221)
At 31 March (Note 9)	<u>10,859</u>	<u>10,859</u>

Credit risk exposure in relation to bank and cash balances, fixed deposits and other receivables as at 31 March 2020 and 31 March 2019 are insignificant, and accordingly no credit loss allowance is recognised as at 31 March 2020 and 31 March 2019.

c) Fair values of financial assets and financial liabilities

The carrying amounts of financial assets and financial liabilities are reasonable approximation of their respective fair values, either due to their short-term nature or that they are floating rate instruments that are re-priced to market interest rates on or near the end of the reporting period.

19. Reserve position and policy

The Home's reserve position as at 31 March 2020 is as follows:

	2020 \$	2019 \$	Increase/ (decrease) %
A Unrestricted funds			
General Fund	13,825,761	12,096,512	14.30
Unrestricted designated funds			
Capacity Expansion Fund	7,000,000	7,000,000	–
Capability Building Fund	1,860,000	1,860,000	–
Total unrestricted funds	22,685,761	20,956,512	8.25
B Restricted funds			
Community Silver Trust Fund	2,627,224	3,598,711	(27.00)
Designated Donation Fund	160,930	160,930	–
	2,788,154	3,759,641	(25.84)
C Endowment funds	N/A	N/A	N/A
D Total funds	25,473,915	24,716,153	3.07
E Total annual operating expenditure	9,036,339	8,153,344	10.83
F Ratio of funds to annual operating expenditure (A/E)	2.51	2.57	(2.33)

Reference:

- C. An endowment fund consists of assets, funds or property that are held in perpetuity which produce annual income flow for a foundation to spend as grants.
- D. Total funds include unrestricted, restricted and endowment funds.
- E. Total annual operating expenditure includes expenses related to cost of generating funds, cost of charitable activities and governance and other administrative costs.

The Home's reserve policy is as follows:

The Home at any point in time will have 5 years of operational expenses kept as reserves and will be reviewed yearly by the Management Committee if the amount of reserves is sufficient and if it needs to be revised.

20. Authorisation of financial statements

The financial statements of the Home for the financial year ended 31 March 2020 were authorised for issue in accordance with a resolution of the Management Committee meeting dated 30 September 2020.