



Ms Ike Handayani, a domestic helper from Indonesia, and Mr Tan Pui Lok, a third-year nursing student at Ngee Ann Polytechnic, are volunteers under Tan Tock Seng Hospital's Integrated Care Hub's Para-Nursing Volunteer Programme. PHOTO: LIANHE ZAOBAO

30 more volunteers join TTSH para-nursing programme

They join over 90 current volunteers to work with nurses to care for patients

Leow Wen Xuan

Ms Ike Handayani has only one day off a week, and she spends it taking care of elderly patients – whom she affectionately calls “Ah Ma” and “Ah Gong” – at Tan Tock Seng Hospital's Integrated Care Hub (TTSH-ICH).

The 38-year-old domestic helper from Indonesia said that when she is caring for the elderly, she feels as though she is caring for her parents, who are in their 70s, and that the patients treat her like their daughter or granddaughter.

She is a volunteer under TTSH-ICH's Para-Nursing Volunteer Programme, and had chanced upon the programme online and joined to “deepen her knowledge” on caregiving.

She is among the more than 90 regular volunteers – aged 18 to 45, and including nursing students, domestic helpers and housewives – who have joined the programme, which was rolled out in December 2023 with an initial group of 14.

On April 28, the programme was slated to welcome 30 more volunteers, said senior nurse manager K. Patmawali, para-nursing volunteer lead and one of the programme's initiators.

According to TTSH, it is the only hospital here with a para-nursing volunteer programme, where non-professional volunteers work with nurses to provide care for patients, allowing nurses to focus on higher-risk activities such as providing medication and invasive procedures.

Unlike other volunteer programmes, this initiative equips volunteers with caregiving skills through on-the-job training with their nurse buddies and training that is specific to the programme. For example, volunteers are taught how to turn a patient on a bed safely and how to help a patient shower.

They also befriend patients and assist them in changing their diapers, using the toilet, taking walks and having meals, among other things.

Throughout the sessions, volunteers are supervised by their nurse buddies.

The programme currently serves seven wards in the ICH, which focuses on rehabilitating patients and reintegrating them into the community.

Amid the hectic schedules of shared wards, said senior staff nurse Nur Alif Sharif, the programme lightens the workload of workers and increases efficiency.

Sometimes, when patients call for assistance while the nurses are serving medication to others, the volunteers can check on them, he said.

“If they ask for something mini-

mal, like getting a drink, the volunteer can get it for the patient. So at least it will help me to focus on what I am doing.”

Madam Patmawali agreed that the nurses are usually kept busy. “I can see (the nurses) don't even go to the toilet sometimes. Some of them don't even go for their break.”

Having the volunteers also improves the patients' experience, said Mr Alif.

“Sometimes, we are so busy with work, we don't have time to have conversations. With the volunteers befriending and talking to the patients, they feel happier. Sometimes, they'll even ask us the next day if the volunteer is coming.”

Madam Patmawali said that on average, about four volunteers come on a weekday, with more coming on weekends to help out.

The hospital hopes to expand the programme's scope to its main wards and teach volunteers higher-level skills, such as feeding patients through a tube that carries food and medicine to the stomach through the nose.

Later in 2024, more experienced volunteers will be trained in urine catheter care, said Madam Patmawali.

Another regular volunteer is Mr Tan Pui Lok, 20, a third-year nursing student at Ngee Ann Polytechnic.

Mr Tan, who has been volunteering at the ICH since December, said he decided to do so as it provides him with more opportunities to interact with patients.

Clinical attachments that his school facilitates focus more on hard skills, such as how to manage a bone fracture, but less on talking with patients, he said.

“By volunteering, it gives me more opportunities to hone my soft skills, for example, communication.”

Mr Tan found out about the programme through a staff member at his school, who suggested that he gain more exposure and learn more medical conditions through volunteering.

He said some of his lecturers said it is good that he volunteers, but reminded him to “find a good balance between studying and volunteering.”

“I hope to promote volunteerism among youth, where youth of different expertise could make an impact on our society, making Singapore a better place to live in,” he added.

To join the Para-Nursing Volunteer Programme, applicants have to be above 16 years old and go through an interview process and training programme.

For more information on TTSH's volunteer programmes, visit its website.

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End-of-life care

Singapore is increasing its palliative care and hospice capacity to allow more people with life-threatening illnesses to live well till the very end, and die with dignity and comfort. By 2025, there will be 300 inpatient palliative care beds, 140 day hospice places and capacity for palliative home care for 3,600 patients. **Joyce Teo** looks at the care options available.

PALLIATIVE DAYCARE

- For patients with a prognosis of one year or less to live, who are fairly ambulant or can safely move around in a wheelchair, and do not require 24-hour nursing assistance.
- Two-way transport to the daycare centre and meals or snacks are provided.
- There are daily activities and therapeutic programmes, such

as art and movement therapy, organised by trained healthcare professionals and volunteers.

- Daycare is typically offered from 9am to mid-afternoon, giving caregivers some respite.
- HCA Hospice and Dover Park Hospice offer the service at no charge; Assisi Hospice charges \$10 per day.



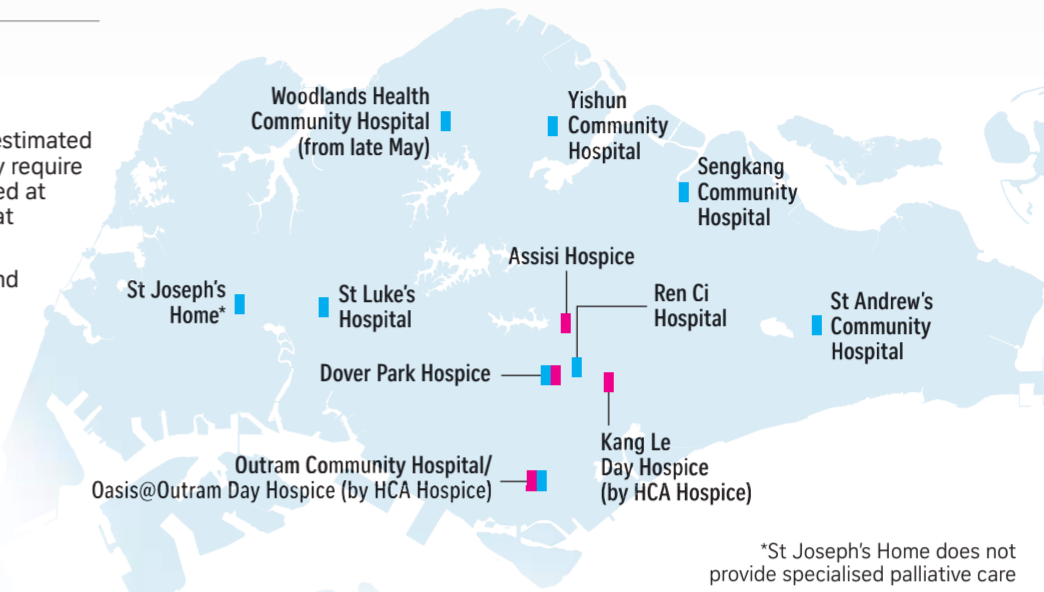
INPATIENT PALLIATIVE CARE



- Typically for patients who have an estimated three months or less to live. They may require specialist care that cannot be provided at home, or do not have any caregivers at home.

There is round-the-clock medical and nursing care, focusing on the management of pain, breathlessness and other symptoms, as well as specialised care, such as the administration of intravenous medication or management of complex wounds.

- Fees are subsidised, based on means-testing. MediShield Life claim limits have been raised to \$460 a day – or \$500 if specialised inpatient palliative care is needed – with effect from Feb 1. Up to \$250 a day, or \$350 a day for specialised care, can also be utilised from MediSave.



*St Joseph's Home does not provide specialised palliative care

PALLIATIVE HOME CARE

COVERAGE

- 1 Islandwide
- CS Central and South
- E East
- W West



- Typically for patients who have a prognosis of one year or less to live, and wish to die at home. They must have a caregiver at home.

An assigned nurse will make home visits, with the frequency determined by the patient's condition and needs. For instance, if a patient is stable, visits could be once a month. Other healthcare professionals, including doctors and counsellors, may visit if needed.

Medical equipment, such as a hospital bed, is needed at home. These can be purchased or loaned from the palliative home care provider.

Caregivers receive training and can call a 24-hour helpline for guidance if a medical crisis occurs outside work hours.

The service is currently provided at no charge, thanks to government subsidies and charity dollars.

HOW TO GET PALLIATIVE CARE?



Palliative care can be provided at home, in nursing homes, hospices, specialist clinics and general and community hospitals. A specialist, polyclinic doctor or general practitioner can provide a referral to a suitable palliative care service.

In Singapore, the term palliative care is often used interchangeably with hospice care, though there are subtle differences.

The Singapore Hospice Council said hospice care is largely associated with care provided by services in the community, such as a dedicated facility or within the home, close to or at the end of life, whereas the term palliative care has a broader scope and includes the care provided both earlier in the course of the illness and towards the end of life.

Source: SINGAPORE HOSPICE COUNCIL PHOTO: HCA HOSPICE STRAITS TIMES GRAPHICS

Migrant worker dies after he was hit by forklift in Sungei Kadut

Andrew Wong

A migrant worker from Bangladesh working at a salvage yard in Sungei Kadut was struck in the neck by a forklift and later died of his wounds.

The Straits Times understands the forklift driver at Beng Cheng Metal did not call for an ambulance after the incident on April 16, which happened at around 10am.

He used his own car to rush Mr Biswas Sanjay Kumar, 37, to Ng Teng Fong General Hospital, where the worker succumbed to his injuries on April 22, said Mr Alvin Lim, one of the directors of the company.

“He (Mr Biswas) had been with the company for only one month, so it's very unfortunate. It was an accident, and we are still in shock,” he added.

Mr Lim said that on the day of the accident, Mr Biswas, who was hired as a driver, was shouting out instructions to the forklift driver operating the machine.

The forklift driver only suspect-



Mr Biswas Sanjay Kumar leaves his wife, daughter and mother. His body has been repatriated to his village in Bangladesh.

ed something was amiss when Mr Biswas went quiet. He then found the Bangladeshi lying on the ground.

Mr Lim said: “The (forklift driver) had a car and when he saw what happened, he panicked. He thought the best and fastest way was to take him (Mr Biswas) to hospital himself.”

A spokesman for the police, who are investigating the incident, said they received a call for assistance from the hospital at 10.40am on April 16.

In response to queries from ST, the Ministry of Manpower (MOM) said Mr Biswas was guiding a forklift operator, who wanted to lift a bag of scrap metal, when one of the forks struck him on his neck.

The ministry said that as a general safety measure, forklift oper-

ators must check and ensure that nobody is within close proximity of the machine when it is in use.

MOM added that it has instructed Beng Cheng Metal to stop all work activities on the premises.

Mr Biswas leaves his wife, their 18-month-old daughter and his mother.

He came to Singapore 10 years ago, hoping to earn enough money to build a house for his family in Joydih village, said his cousin, Mr Ojha Tapas, 36.

He heard about the tragedy from Mr Biswas' family in Bangladesh. The hospital had contacted the family.

“When I got to the hospital, his heart (had) already stopped. He was not breathing, and I saw a very big injury on his head,” said Mr Ojha, who has also been working in Singapore for the past 10 years but for a different company.

He added that Mr Biswas had needed emergency procedures but never recovered.

“His wife and mother have been crying since they got the news. Everybody is in tears and feeling helpless.”

Mr Ojha said Mr Biswas' body was repatriated to his village on April 26.

“He wanted to make more money to help his family, and give his daughter a good education so she could become a doctor,” he added.

Mr Lim said Beng Cheng Metal is working out details of the compensation, from its insurance, to Mr Biswas' family, adding that the firm will try to provide some financial assistance to them in the meantime.

Singapore's workplace fatality rate had fallen to its lowest-ever level in 2023, MOM said on March 27 in its annual workplace safety and health report.

Statistics showed 36 workers died in 2023, a 21.7 per cent drop from the 46 deaths in 2022.

The construction sector saw the most number of deaths in 2023.

Eighteen workers died, including 20-year-old Vinoth Kumar, who was killed when a wall collapsed during demolition works at the Fuji Xerox Towers site in Tanjong Pagar on June 15, 2023.

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