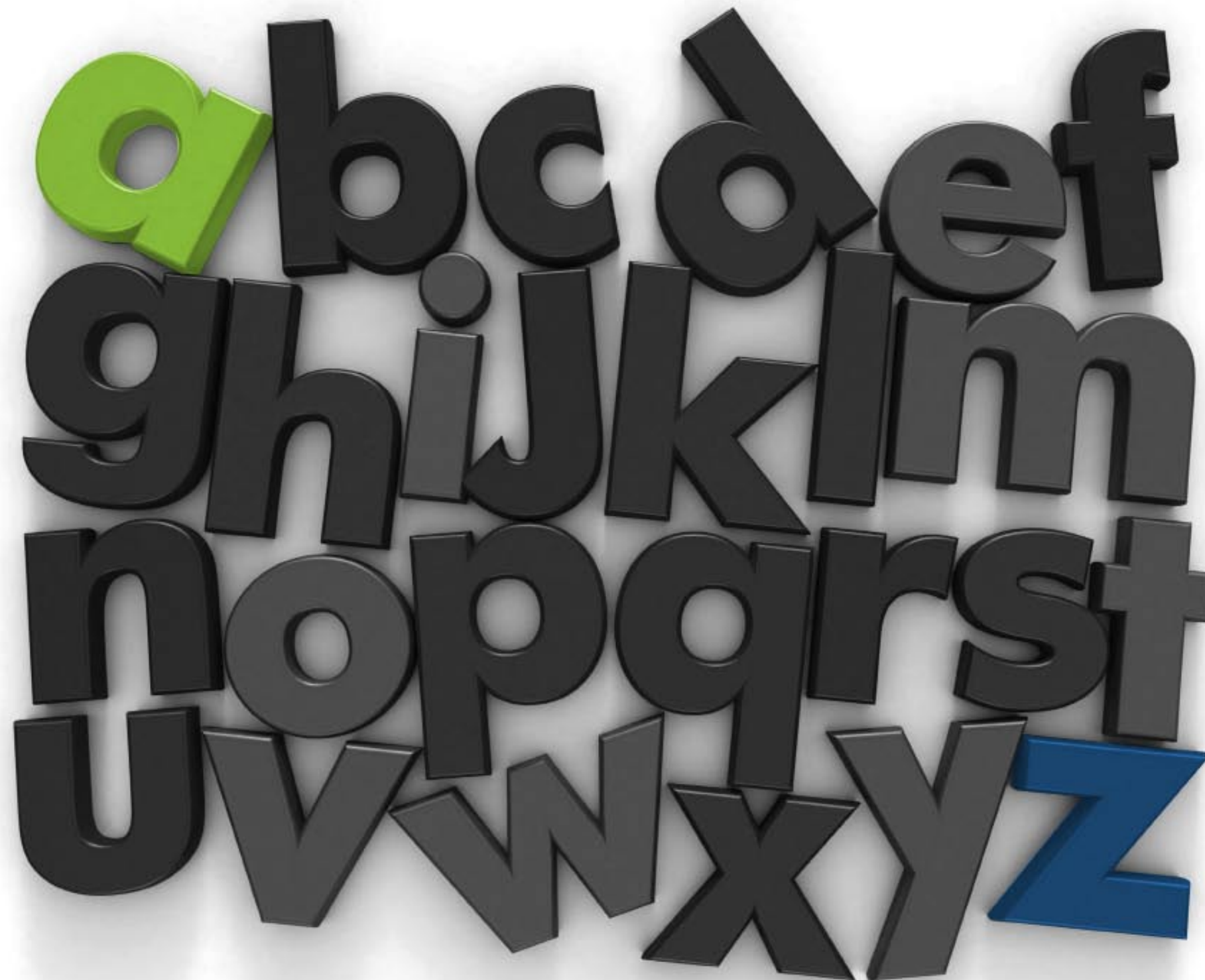


a-z **OF** **HEALTH**

HEALTH PROMOTION BOARD
ANNUAL REPORT 2008/2009



**IF YOU THINK ONLY TRIATHLETES,
VEGETARIANS AND GYM-GOERS
CAN BE HEALTHY, YOU COULDN'T BE
MORE WRONG.**

**BEING HEALTHY'S REALLY NOT THAT
DIFFICULT. IT'S ALL ABOUT TAKING
THE RIGHT STEPS.**

**ENGAGING IN AEROBIC EXERCISE
FIVE TIMES A WEEK, TAKING TIME
OUT WHEN YOU'RE FEELING
STRESSED AND MAKING SURE
YOU'RE CONSUMING ENOUGH
FRUITS AND VEGETABLES ARE JUST
SOME OF THE EXAMPLES OF WHAT
YOU CAN DO.**

LIKE WE SAID, IT'S AS EASY AS ABC.

VISION, MISSION & VALUES

OUR VISION

A nation of healthy and happy people.

OUR MISSION

“Promote health excellence by empowering individuals to take ownership of their health”

Through

- Being a centre of excellence for health promotion, disease prevention and patient education
- Establishing, engaging and supporting local and international partnerships
- Being a people-centred organisation that inspires and enables our employees to realise their full potential

OUR VALUES

CARE AND CONCERN

We show care and concern for the well being* of our staff and all Singapore residents.

*(*well being includes development of staff)*

PROFESSIONALISM

We do our work with expert knowledge and skills.

INTEGRITY

We maintain a high standard of ethics and manage resources responsibly.

RESPECT

We treat everyone with respect.

COMMITMENT

We are committed to do our best.

INNOVATION

We constantly seek new and better ways to promote health.

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CHAIRMAN'S MESSAGE



In the year under review, the Health Promotion Board (HPB) undertook several bold initiatives to ensure that our organisational remit remains relevant to the health needs of the nation.

The Board reconsidered its vision and mission in the light of Singapore's evolving population landscape. Our new vision is to build a nation of healthy and happy people. It also highlights both physical and mental well-being as key in building holistic health and mental resilience.

Our new mission is to "Promote health excellence by empowering individuals to take ownership of their health" through:

- Being a centre of excellence for health promotion, disease prevention and patient education
- Establishing, engaging and supporting local and international partnerships
- Being a people-centred organisation that inspires and enables our employees to realise their full potential

HPB performs multiple roles as the nation's leading advocate of health and healthy living. To achieve our strategic objectives and fulfil our expanded role as a national planner and policy-maker for national health promotion and disease prevention strategies, policies and guidelines, it is essential for us to prioritise our resources and refine our organisational structure and processes.

To serve the needs of our ageing population, a new Healthy Ageing Division was formed. In addition, the Smoking Control department under the Adult Health Division was renamed Substance Abuse, and expanded its focus to include alcohol education, as binge drinking was identified as a new health threat.

Healthy habits acquired from youth are the foundation for lifelong health. HPB spearheaded several key youth-oriented events to encourage the youths of Singapore to embrace healthy living and to promote the benefits of a healthy lifestyle to their peers.

The annual National Healthy Lifestyle Campaign (NHLC) took on a youth focus for the first time, with the theme, "Breathe". It encouraged young people to appreciate health as an asset for them to achieve their fullest potential and ambitions in life through an array of activities and events.

Youths also formed the focus of the Board's observance of World No Tobacco Day (WNTD) 2008, in line with the World Health Organization's theme of "Tobacco Free Youth". A two-day advocacy workshop was conducted for youths and youth workers, while the signature event comprised an exhibition, a street walk to spread tobacco-free messages and a slew of youth-centric activities and events.

Youth volunteers from Audible Hearts, an online peer support platform supported by HPB, took the lead in disseminating mental health messages to their peers in the run-up to World Mental Health Day. They planned, developed and executed "Only Human", an event comprising a drama performance and interactive exhibition to empower youths to build mental resilience.

To enhance the effectiveness of our health promotion efforts, HPB undertook several targeted initiatives to reach out to the adult population. A concept store called "Truly Gorgeous" was set up in high-traffic malls to communicate messages about sexual health, cervical cancer and the importance of screening, as well as the harms of smoking, to women aged 21 to 40 years.

In continuing efforts to promote greater awareness about HIV/AIDS among adults, the Board organised "Love Amplified", Singapore's first large-scale World AIDS Day concert. It also commissioned "By My Side", a popular 20-episode Channel 8 drama that attracted nearly 2 million viewers.

Mindful of the needs of the ageing population, the Board developed FaBuLous, a simple fitness programme for seniors to promote flexibility, balance and strength through two easy-to-follow routines. It also launched the Diabetes Education Campaign to raise awareness among older adults of the seriousness of diabetes and the importance of

screening for early detection, as well as encouraged patients with diabetes to manage their disease condition optimally.

Our partners have been instrumental in helping us optimise our reach. In 2008, we garnered the support of over 30 corporate partners for key projects such as NHLC 2008, the "Love Amplified" World AIDS Concert and WNTD 2008, as well as fitness programmes such as Fitness @ Work and i-Run. We are grateful for their support in making our programmes a success.

People form the bedrock of HPB. We achieved special mention for the Leading HR Practices in Learning and Human Capital Development Award category at the Singapore HR Awards 2008, in recognition of management strategies and efforts to develop our talent. Thirty-three of our staff also received the Excellent Service Award in 2008. I would like to extend my thanks to the management and staff of HPB for their hard work and dedication in promoting health among the people of Singapore.

Moving forward in 2009, we are mindful that our fast-moving lifestyle and rapidly ageing population present numerous health challenges. Preventive health may also take a back seat for many in the current economic climate. As such, it is important for the Board to step up efforts to ensure that preventive health and healthy living remain a priority, and that the latter is easily achievable. The Board will continue its focus on key health areas as well as emerging issues, to empower all Singaporeans with the knowledge and skills to enjoy the best possible health and quality of life.

We look forward to another rewarding year in health promotion and disease prevention.


Mr Lucas Chow
Chairman

BOARD OF DIRECTORS



Mr Lucas Chow
Chairman
HPB
Chief Executive Officer
MediaCorp Pte Ltd



Mr Lim Soon Hock
Managing Director
PLAN-B ICAG Pte Ltd



Mr Tan Boon Huat
Chief Executive Director
People's Association



Mr Oon Jin Teik
Chief Executive Officer
Singapore Sports Council



Mr Teo Eng Cheong
Chief Executive
Competition Commission of
Singapore



RADM (Dr) John Wong
Chief of Medical Corps
Singapore Armed Forces



Mr Adam Khoo
Executive Chairman
Adam Khoo Learning
Technologies Group

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- Mdm Zuraidah Binte Abdullah
- Mr Teo Eng Cheong

MEDICAL AND DENTAL BOARD

- RADM (Dr) John Wong
- Mr Oon Jin Teik
- Dr Ho Han Kwee

PERSONNEL BOARD

- Mr Lucas Chow (Chairman)
- Mr Wong Siew Hoong
- Mr Wen Khai Meng

INVESTMENT COMMITTEE

- Mr Lim Soon Hock (Chairman)
- Mr Adam Khoo
- Mr Oon Jin Teik

BOARD OF DIRECTORS



Mr Wong Siew Hoong
Director of Schools
Ministry of Education



Mdm Zuraidah Binte Abdullah
Chief Executive Officer
Yayasan Mendaki



Mr Ho Han Kwee
Director (Primary & Community Care)
Ministry of Health



Mr Wen Khai Meng
Chief Investment Officer
Capitaland
Deputy Chairman
Capitaland Commercial

HPB LEADERSHIP



Mr Lam Pin Woon
Chief Executive Officer



Dr K Vijaya
Director
Corporate Marketing and Communications Division



Dr Rose Vaithinathan
Director
Youth Health Division



Dr Chew Ling
Director
Research and Strategic Planning Division
(with effect from 1 March 2009)



Dr Theresa Yoong
Director
Adult Health Division
(up till 30 November 2008)



Dr Shyamala Thilagaratnam
Director
Healthy Ageing Division
(with effect from 1 October 2008)



Dr Annie Ling
Director
Adult Health Division
(with effect from 1 January 2009)
was Director, Research and Strategic Planning Division (up till 31 December 2008)



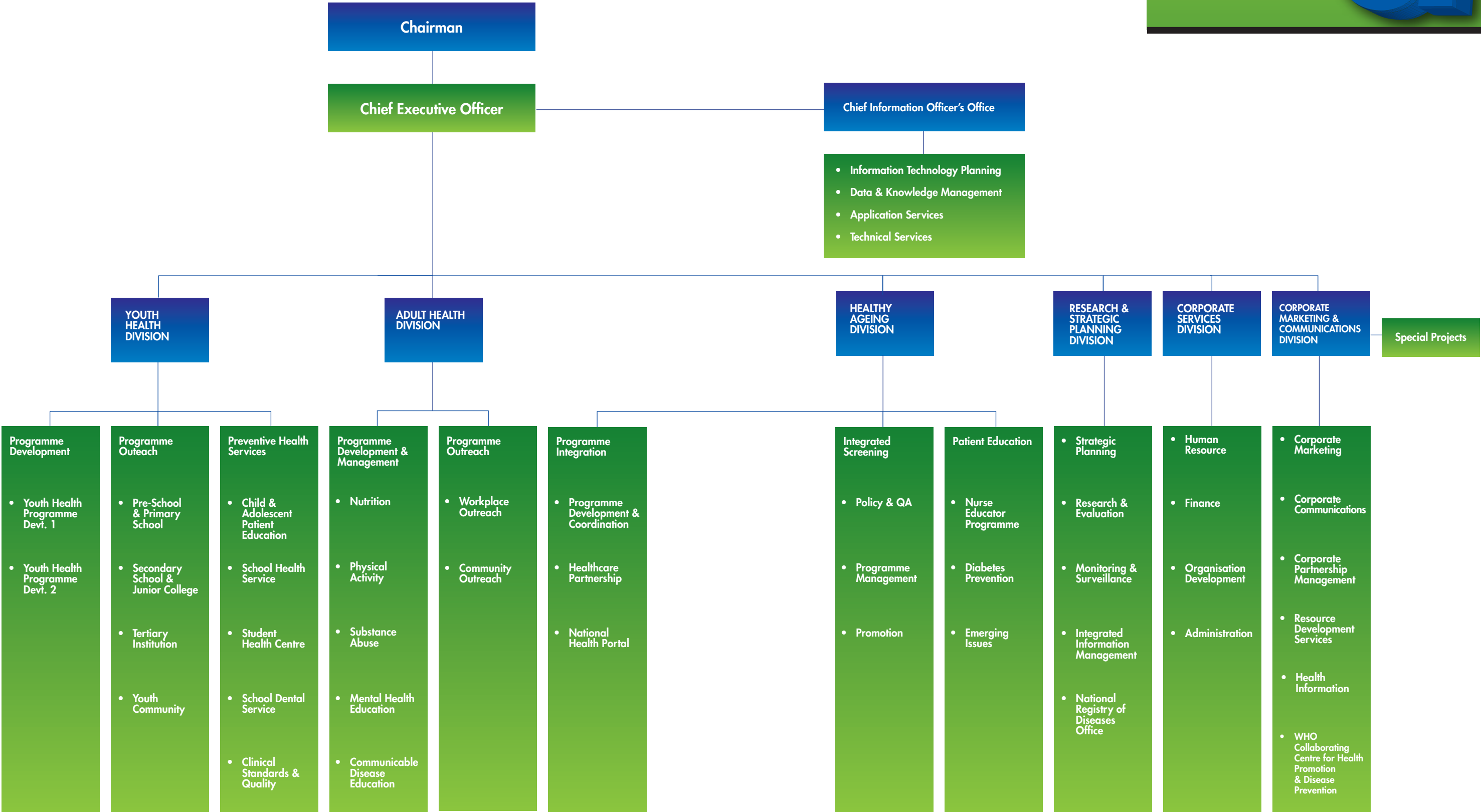
Mrs Tan Seok Lee
Director
Corporate Services Division



Ms Low Sau Chan
Chief Information Officer

ORGANISATION STRUCTURE

Advocating healthy living is what HPB firmly believes in. Through our policies and initiatives, we strive to create a healthier Singapore.



CHILDHOOD HEALTH, LIFELONG BENEFITS

A strong, healthy foundation for our children today is the key to a healthier generation for tomorrow. Our preventive health services set Singapore's children on the path to a healthier future.

Breathing right can be an easy solution for quick stress relief. In fact, regulating your breathing can help you deal with anxiety, nervousness and panic attacks.



SCHOOL HEALTH SERVICE (SHS)

NATIONAL CHILDHOOD IMMUNISATION PROGRAMME

SHS provides booster immunisations against diphtheria, tetanus, poliomyelitis, measles, mumps and rubella. In 2008, the Childhood Immunisation Schedule was revised with the following changes:

- The second booster for diphtheria and tetanus will be given at Primary 5 instead of Primary 1, and the third booster will no longer be required
- The booster for measles, mumps and rubella (MMR) immunisation has been brought forward from Primary 6 to Primary 1

Table 1: Revised National Immunisation Schedule

Disease	Type of Vaccine	Primary Course	Booster
Tuberculosis	BCG	At birth	-
Hepatitis B	Hepatitis B	At birth 1 st dose 1 month 2 nd dose 6 months 3 rd dose	-
Diphtheria, Pertussis and Tetanus	DPT/DT	3 months 1 st dose 4 months 2 nd dose 5 months 3 rd dose	18 months 1 st booster 11 years 2 nd booster (DT*)

Poliomyelitis	Oral Sabin	3 months 1 st dose 4 months 2 nd dose 5 months 3 rd dose	18 months 1 st booster 7 years 2 nd booster 11 years 3 rd booster
Measles, Mumps and Rubella	MMR	1 year	7 years

+ DT containing vaccine

SHS has put in place a systematic process to ensure that all students will catch up with the new schedule. In 2008, the immunisation coverage for both diphtheria and tetanus for Primary 5 and 6 was 96% and 98% respectively.

Coverage for polio (Sabin) was 93% for Primary 1, 97% for Primary 5 and 99% for Primary 6. Coverage for MMR was 93% for Primary 1, 96% for Primary 5 and 98% for Primary 6.

Polyclinics and general practitioners provide immunisation for infants and preschool children. The immunisation coverage over the past few years is shown in Table 2.

Table 2: Immunisation¹ Coverage for Children at 2 Years of Age

	2006 (%)	2007 (%)	2008 (%)*
BCG	98	99	99
Diphtheria	95	97	97
Poliomyelitis	95	97	97
Hepatitis B	95	96	96
Measles	95	95	93

Report Date :22/02/09

¹ Data refers to immunisation given to all Singaporean and Singapore-PR children

* Preliminary data

HEALTH SCREENING OF STUDENTS

The annual health screening is carried out at all schools by health teams comprising doctors and nurses.

In 2008, 98% of the Primary 1 cohort, 99% of the Primary 5 cohort and 98% of the Primary 6 cohort were screened. In addition, 310,573 students of other levels (Primary 2 to 4 and Secondary 1 to 4) were seen for selective screenings such as for vision and scoliosis.

STUDENT HEALTH CENTRE (SHC)

SHC serves as a referral centre for students who have been identified with possible growth and development or other health problems during the annual health screening in schools. A total of 59,402 students attended SHC in 2008.

Table 1: Attendance at SHC Clinics (2008)

General Clinics	32,618
Immunisation Clinic	12,347
Refraction Clinic	11,082
Nutrition Clinic	7,225
Specialist Clinic	4,125

SCHOOL DENTAL SERVICE (SDS)

SDS operates 197 school dental clinics, 30 mobile dental clinics and a dental centre at the Health Promotion Board (HPB), reaching out to all primary and secondary school pupils.

Calcium is vital when it comes to your body's health. It keeps your teeth and bones strong, and ensures that your muscles and nerves function well. Foods rich in calcium include milk, cheese, sardines, almonds and broccoli.



In 2008, 238,157 primary school and 93,983 Secondary 1 and Secondary 3 pupils were screened, of which 226,382 (96%) and 90,010 (89%) respectively were rendered dentally fit. A Decayed, Missing and Filled Teeth (DMFT) index of 0.70 was achieved among the 12-year-olds, with the 15-year-olds obtaining a DMFT of 1.1.

Aligning with the Ministry of Health (MOH)'s policy on fee charges, a treatment fee was imposed on pupils with permanent resident and non-resident status referred to SDC for management from 1 April 2008. Both categories of patients as well as citizens continue to receive free treatment in the school and mobile dental clinics.

LAUNCH OF HAPPY BRUSH



The Happy Brush was successfully launched at the International Dental Exhibition and Meeting on 4 April 2008 at Suntec City.

Designed by SDS, it is a 3-in-1 brush that allows all three surfaces of a tooth to be brushed at the same time using a to-and-fro motion. It aims to make brushing easier by reducing the total number of strokes by more

than half, when compared to the conventional roll method taught to children.

The brushes are sold locally for \$2.50 at SDC, HealthZone, the National Dental Centre (NDC) pharmacy and 76 primary school bookstores.

TRAINING OF DENTAL THERAPISTS AND DENTAL HYGIENISTS

SDS supports the training of students from Nanyang Polytechnic (NYP) in the Diploma in Dental Hygiene and Therapy Course by providing clinical practice training sessions on dental therapy at SDC.

Detection of diseases in their early stages is essential for maintaining good health. Regular check-ups and screenings help immensely, which is why they should be taken seriously.



The clinical practice sessions on dental hygiene conducted at NDC were transferred to SDC from 15 April 2008. NDC continues to provide the trainers. The adult patients seen were charged \$21 per attendance. The fees collected were in lieu of the rental of space and use of facilities at HPB.

COLLABORATION WITH VENDORS

SDS collaborated with Hwee Jan (S) Pte Ltd and Ecquaria Technologies Pte Ltd to exhibit and market mobile dental clinics and the Integrated Dental Electronic and Assessment for Students (IDEAS) system during the International Dental Exhibition and Meeting.

SDS also signed a collaboration agreement with Hwee Jan on 21 April 2008 to jointly commercialise and market mobile dental clinics locally and overseas. A sale of one mobile dental clinic has been successfully made in the year.

COLLABORATION WITH THE NORTH WEST COMMUNITY DEVELOPMENT COUNCIL (NW CDC) AND THE NATIONAL UNIVERSITY OF SINGAPORE (NUS) FACULTY OF DENTISTRY

A collaboration project with NW CDC and NUS was launched on 2 Nov 2008 at Block 2 Marsiling Drive to bring dental care to the community.

Two mobile dental clinics from SDS were deployed for a week each at the Woodlands Community Centre (CC) and Chong Pang CC. Dental officers, oral health therapists, dental students and staff members of NUS rendered dental care comprising screening, scaling, oral hygiene instructions, dental restorations and extractions at a concessionary rate of \$9 per attendance to the elderly and needy.

Senior citizens on the Public Assistance Scheme were given free treatment. A total of 224 elderly people benefitted from the programme.

To complement the treatment offered by private dental clinics, all patients under the Primary Care Partnership

Scheme (PCPS) who required follow-up treatment were given a list of participating PCPS clinics in Yishun and Woodlands.

CLINICAL STANDARDS AND QUALITY

STANDARD OPERATING PROCEDURES (SOPs)

A total of 26 SOPs for nurses and dental therapists were developed and reviewed, and uploaded into the School-based Health Programme System (SHPS) and IDEAS.

AUDIT ACTIVITIES

Significant audit activities conducted in FY2008 include:

- **Practice Standards for Healthcare Professionals**

Medical officers, locum doctors, nurses, dental therapists and dental officers and their assistants were assessed to gauge practice standards and identify gaps for improvement.

Optometrists at the Refraction Clinics (RCs) in the Choa Chu Kang and Geylang Polyclinics and SHC were also audited, achieving a mean score of 97%. The 11 preschool vision screening teams were audited as well, achieving a 99.5% score.

- **ST Logistics Audit**

Another audit to monitor ST Logistics's compliance with guidelines on storage and maintenance of vaccine cold chain, surgical supplies and biohazard wastes management, procurement procedures and field equipment inventory was conducted in May and October 2008.

ST Logistics achieved a 100% score.

- **Schools Orientation Programme**

From 21 September 2008 to 2 January 2009, more than 300 nurses and dental staff from HPB conducted the Schools Orientation Programme for parents of Primary 1 students in 177 primary schools.

Briefings were also conducted for principals, teachers and school administrators in 50 primary and seven special and religious schools. The topics covered include health screening, immunisation, oral health and health promotion services.

EMERGENCY PREPAREDNESS

Forty Youth Health Division (YHD) staff participated in two national exercises conducted by MOH. Exercise Ninja monitored the activation time of contact tracers in the event of an infectious disease outbreak, while Exercise Roving Hawk involved serving Home Quarantine Orders with CISCO officers.

A total of 38 medical, nursing and management support staff received refresher training at the Blood Services Group, Health Sciences Authority (HSA), in June and November 2008.

YHD SERVICE EXCELLENCE AWARD PRESENTATION 2008

YHD staff received positive feedback on their service delivery from parents and school staff. Staff from SHC and SDC achieved satisfaction scores of 96% while field staff from SHS and the SDS received scores of 98%.

Staff who did well were given recognition at the YHD Service Excellence Award Presentation on 13 March 2009 at the DBS Auditorium.

NATIONAL MYOPIA PREVENTION PROGRAMME

ST Logistics Pte Ltd was engaged to run the preschool vision screening and myopia education programme from 2 January 2008 onwards.

Students in the mainstream schools continued to have vision screenings and myopia education by SHS. In August 2008, the RC at Choa Chu Kang was closed.

KINDERGARTENS AND CHILDCARE CENTRES

A total of 73,641 children in K1 and K2 were screened using the LogMar charts in 1,176 preschools. Of these, 13,232 children were referred to RCs for further assessment. The overall attendance rate at these RCs was 58%.

MAINSTREAM PRIMARY AND SECONDARY SCHOOLS

A total of 230,274 primary and 153,319 secondary school students were screened. Of these, 83,696 students were found to have defective vision and were referred to private optometrists or optical outlets for further testing.

Primary 1 students were referred to RCs.

SPECTACLES FUND

HPB continued to collaborate with Essilor Singapore to provide assistance for needy students who need spectacles. A total of 629 retail outlets have participated in the initiative, which has benefitted 1,806 students.

Eating right is an important part of a healthy lifestyle. Remember to eat a variety of nutritious foods from every food group, so that your body has enough vitamins, minerals, fibre and other nutrients to function at its optimum level.



HELP YOUTHS MAKE THE RIGHT CHOICES

From eating right to living right, we want our youths to make the best lifestyle choices they can. HPB's outreach programmes and initiatives equip our youths with the knowledge and skills to take the right steps mentally, emotionally and physically.



NATIONAL HEALTHY LIFESTYLE CAMPAIGN (NHLC) 2008: “BREATHE”



Prime Minister Lee Hsien Loong launches NHLC 2008

Targeted at youths for the first time, NHLC 2008 sought to encourage them to appreciate health as an asset for them to achieve their fullest potential and ambitions in life.

The campaign, called “Breathe” to encourage youths to breathe in life, choice, self-expression and truth and breathe out insecurities, pessimism, pressure and judgment, was launched by Prime Minister Lee Hsien Loong at The Padang on 7 November 2008. It was attended by more than 10,000 youths.

The event included activities such as Human Table Soccer and Wii Fit to bring healthy messages to the young in a vibrant, youthful and innovative way, while local celebrities shared healthy living tips with the youths.

The event also featured the final round of Dancebeatz, a hip-hop dance competition featuring youths who choreographed and performed hip-hop dance routines with a health-related theme.

NUTRITION

HEALTHIER CHILDREN’S MENU PROGRAMME

The Healthier Children’s Menu Programme was introduced in 2008 as an extension of HPB’s Healthier Dining Programme.

Participating dining outlets modify their children’s menus so that young diners can enjoy healthier food prepared with less oil, salt and sugar, and enhanced with more fruit and vegetables. To date, there are 27 restaurants participating in this programme.

HEALTHY FOOD RACE

The Healthy Food Race 2008 was a three-month long online quiz game covering supermarkets, food courts and other youth-centric healthier eateries, to equip lower secondary school students with the knowledge and skills to make healthier dietary choices. More than 10,000 students logged on to the online quiz and 500 students were shortlisted for the semi-finals. The finals were held on 7 November 2008.

MODEL SCHOOL TUCKSHOP PROGRAMME (MSTP)

The MSTP 2008-2009 cycle started in August 2008 and will continue through 2009. Participation from schools totalled 171 primary schools, 153 secondary schools and 14 junior colleges.

Culinary training workshops were conducted to equip canteen vendors with skills and knowledge regarding healthier cooking methods.

HEALTHIER CANTEEN PROGRAMME @ ITEs

The Healthier Canteen Programme @ ITE was piloted at Institute of Technical Education (ITE) College East to help canteen vendors prepare healthier recipes.

Ambient marketing activities to raise the awareness of key nutritional messages and promote the consumption of fruit and vegetables were also launched.

HCS BAZAAR

In collaboration with various food companies selling HCS products, the HCS Bazaar was introduced to 6,900 students in 10 primary schools.

These bazaars targeted teachers and parents. They raised awareness of the HCS logo and highlighted the availability of healthier choice products.

OSTEOPOROSIS AWARENESS CAMPAIGN

An osteoporosis campaign was launched to raise awareness about peak bone mass and encourage calcium-rich diets among the young. The campaign comprised educational advertisements in youth publications and websites, an SMS contest and ambient marketing materials in five secondary schools.

PHYSICAL ACTIVITY

60-MINUTE CHALLENGE

The 60-minute Challenge was conceptualised to raise the awareness of the new physical activity guideline for under-18-year-olds.

The event was held at Bishan Park in August 2008, with over 1,500 primary school and secondary school student registrants.

Fruits are rich in nutrients that help to enhance our immune system and strengthen our body. They are packed with fibre and important vitamins and minerals.



The programme included mass workouts and non-conventional game stalls to garner greater interest in physical activity.

SMOKING CONTROL

WORLD NO TOBACCO DAY (WNTD) 2008

HPB adopted a youth-centric focus for WNTD this year, in line with the World Health Organization (WHO)’s 2008 theme of “Tobacco Free Youth”.



YAH youths in action at World No Tobacco Day, 31 May 2008, at The Cathay

The two-day “Youth Against Tobacco” workshop was conducted for youths and youth workers aged between 15 and 29 years, rallying them to be advocates of a smoke-free lifestyle. Overseas youth advocates and expert trainers shared tobacco advocacy experiences and tips. The overall feedback was positive, with most participants reporting an increase in their knowledge of tobacco advocacy.

The WNTD Signature Event was held on 31 May 2008 at The Cathay External Atrium. Exciting activities, an exhibition and a street walk were held to spread the tobacco-free message to about 1,300 people.

Growing up with a healthy lifestyle is crucial for our children's development. Indeed, instilling healthy habits while our children are still young will reap benefits in their future.



All in all, 63.6% of those who provided feedback on the event noted that it encouraged them to help their family members or friends to quit smoking.

SCHOOL-BASED ACTIVITIES

An array of school-based interactive initiatives were held to promote a smoke-free lifestyle.

- "Clear the Smoke" was an interactive theatre programme for primary schools, which reached about 24,000 students from 34 primary schools.
- The "Too Tuff to Puff" physical activity programme and the "To Puff or Be a Buff" interactive theatre programme focused on the ill effects of smoking on one's fitness. The two programmes reached about 42,800 secondary school students.
- The D.A.R.E. workshops aimed to help student smokers quit smoking by highlighting common misconceptions and equipping them with quitting techniques. A total of 514 students attended the workshops and more than 50% felt more confident about quitting smoking, and have either cut down on their rate of smoking or quit smoking altogether.



Yo Dok! Boys in action

EDUCATIONAL INITIATIVE FOR TOBACCO RETAILERS

HPB, together with HSA, developed an educational video for tobacco retailers to equip them with the skills and strategies to refuse tobacco sales to persons under 18 years of age.

YOUTH-CENTRIC MEDIA AND APPROACHES

Innovative marketing strategies used to spread smoking control messages included:

- Collaborations with the Esplanade to disseminate messages on the harmful effects of smoking to youths through specially commissioned artwork by Esplanade artists – exhibited along the Esplanade tunnel – as well as participation in the Baybeats festival.
- Collaboration with musician Pravin Saivi to develop two MTV-style music videos from songs in his debut album, "Being Me". Health-related messages were woven into these music videos, which are being used as educational tools in smoking control workshops and programmes.



The innovative APRIL software was introduced at the Youths against Tobacco Workshop for youths to see the effects of smoking on their future appearance.

- Project Naam – a pilot project for 52 Secondary 2 and 3 students taking Tamil as their second language. Developed in collaboration with the Ravindran Drama Group, it comprised an interactive theatre forum, followed by a series of workshops highlighting issues pertaining to smoking, binge drinking and STI/AIDS.

MENTAL WELLNESS

AUDIBLE HEARTS "ONLY HUMAN" EVENT 2008

In September 2008, the Audible Hearts youth volunteers organised "Only Human", their first public event for youths aged 17 and above, to raise awareness about the importance of mental wellness, and to equip these youths with the skills to cope with common life challenges.



HPB staff with the Audible Hearts team

The event comprised a drama performance written and put up by the youth volunteers, as well as an interactive exhibition to help youths learn how to manage emotions, appreciate situations from different perspectives, deal with life's challenges and seek help when necessary. Students from the Nanyang Academy of Fine Arts (NAFA) also showcased photography works that reflected the full spectrum of human emotions.

The interactive exhibition was subsequently displayed in five tertiary institutions and various youth-centric community settings, reaching out to over 5,000 youths.

ZIPPY'S FRIENDS PROGRAMME

In March 2008, HPB introduced the Zippy's Friends mental health education curriculum developed by Partnership for Children.

The 24-week programme equips young children with social coping skills to manage their feelings and cope with difficult life situations. It was introduced in three primary schools, reaching over 800 Primary 1 and 2 students.

HEALTH MANPOWER DEVELOPMENT PLAN (HMDP) EXPERT VISIT – ASSOCIATE PROFESSOR (A/P) LOUISE ROWLING

In November 2008, HPB hosted A/P Louise Rowling from Australia as part of the MOH HMDP initiative.

A/P Rowling shared her professional insights on Australia's national mental wellness promotion project and proposed key areas of enhancement for HPB's youth mental wellness promotion programmes.

MENTAL HEALTH FIRST AID (MHFA) COURSE

Ten sessions of the MHFA (Singapore) course were conducted for 220 teachers, lecturers and counsellors from various educational institutions.

The two-day programme equipped participants with the knowledge and skills to identify key symptoms of mental health problems, provide assistance for individuals with mental health problems and facilitate the timely referral of individuals for professional help where appropriate.

FRESHMAN ORIENTATION PROGRAMME AT THE NANYANG TECHNOLOGICAL UNIVERSITY (NTU)

HPB collaborated with the NTU Counselling Centre to organise a mental wellness promotion programme for all first-year students living in the 16 NTU halls-of-residence.

The programme equipped students with the skills to cope with changes and adjust to university life. It also publicised the counselling centre's services.

"EVERYBODY'S HERE" CAMPAIGN

HPB worked with Electrico, a local band, to develop a song entitled "Everybody's Here", which highlighted commonly experienced feelings and emphasised that help is at hand for those who need a listening ear.

A microsite was developed to publicise the song and raise the awareness of Audible Hearts as an online peer support network for youths. The song was nominated as Best Local Song for the Power98 Singapore Music Awards 2008.

COMMUNICABLE DISEASE EDUCATION

SEXUALLY TRANSMITTED INFECTION (STI)/ HUMAN IMMUNODEFICIENCY VIRUS (HIV)/ACQUIRED IMMUNE DEFICIENCY SYNDROME (AIDS) PREVENTION

Community Outreach – "Open Your Heart"

A new initiative called "Open Your Heart" was developed by a group of youth volunteers in collaboration with HPB.

The event comprised a short film entitled "August 29", a photo exhibition produced by the volunteers, an online

photo competition with 121 entries garnering 8,500 votes and a website. A total of 1,000 youths attended the exhibition.

Of the 300 youths surveyed at the event, 74% said the event encouraged them to take protective measures against HIV infection and 82% indicated that they were willing to care for a close relative with HIV.

Awareness of the event was generated through online word-of-mouth marketing and collaboration with influential youth bloggers, resulting in 34 blog entries.

School-based Outreach

- *"Breaking Down Barriers"*

The enhanced "Breaking Down Barriers" Sexually Transmitted Disease (STD)/AIDS Education Programme for Secondary 3 and JC 1 students reached 99% of secondary schools in FY2008.

Pre- and post-programme evaluation showed that after attending the programme, more students were aware of the risk factors for HIV/AIDS transmission. They were also more aware of incorrect transmission modes.

- *StompAIDS*

StompAIDS is a peer-led HIV/AIDS prevention programme for tertiary students.

In 2008, the programme was conducted at all 11 ITE campuses and four polytechnics, reaching about 15,000 youths. Pre- and post-evaluation of the programme showed that more students were aware of casual sex being a mode of transmission of HIV/AIDS (86% versus 79%).

Common misconceptions were also addressed with more being aware of the incorrect modes of HIV/AIDS transmission, such as mosquito bites and the sharing of food or eating utensils with an infected person.

Parent Outreach

The "Love Them. Talk about Sex" programme was rolled out to workplaces in 2008 to help parents talk to their children about sexuality issues.

The programme was attended by more than 600 parents at 17 workplaces in FY2008. Post-programme evaluation showed that more parents intended to talk to their children about sexuality issues and felt confident and comfortable about doing so.

HPB also developed a community-based parent programme in collaboration with the People's Association (PA)'s Women's Executive Committees. Comprising a short play and a workshop, it reached out to more than 500 parents at four community venues.

A workshop for 50 Malay-Muslim parents was also conducted. In the post-programme survey, 90% indicated that they found the workshop useful and 78% said that they intended to talk to their children about sexuality issues after the workshop.

A new radio programme titled "Let's Talk about Sex" was also developed for parents, to address common problems they face when talking to their children about sexuality issues. Covering all four languages, the four-part series was broadcast weekly over 90.5FM, 97.2FM, Warna and Oli.

Outreach via Youth-centric Media

To raise youth awareness about STI/HIV, HPB launched "Not So Secret Lives of Us", a campaign that reached out to youths through a fictional blog, which enabled youths

HIV, or Human Immunodeficiency Virus, is responsible for AIDS – Acquired Immune Deficiency Syndrome. Abstinence, being faithful to one partner and the correct use of condoms are the three key ways to reduce the risk of contracting HIV.



to delve deeper into the issue of HIV/AIDS, casual sex and its impact.

Publicity was generated using youth-centric media such as Facebook and other new media platforms. The blog received about 45,400 visits – of which some 35,000 were unique visitors – while the Facebook group for the site attracted 780 members.



Not So Secret Lives of Us campaign website

HAND, FOOT AND MOUTH DISEASE (HFMD) PREVENTION INITIATIVES

HPB developed and distributed a new guide demonstrating how to screen for HFMD to all preschools.

During the April-May HFMD season, electronic direct mailers targeted at parents were sent to childcare centres and workplaces to increase outreach efforts to parents and caregivers. The mass media campaign in late February and March was extended in view of the surge in numbers during this period.

HPB also ran informative 60-second live reads via Chinese, Tamil and Malay radio with information on the signs of HFMD, and urged parents and caregivers to keep sick children at home.

ORAL HEALTH

HEALTHIEST KID'S SMILE

HPB collaborated with Mediacorp to organise the Healthiest Kid's Smile roadshow and contest in March 2009 at Sembawang Shopping Centre and IMM, to raise parental awareness about the importance of baby teeth and equip them with the skills to care for their children's teeth.

A skit, stage games and other activities disseminated key oral health promotion messages, while a photography contest was organised to encourage parents to send in pictures showcasing their preschool children's healthy teeth.

A total of 5,000 parents attended the roadshow and over 2,000 entries were received for the photography contest.

MYOPIA PREVENTION



Preschool children engaging in outdoor play at HealthZone during Eye Care Week

that required primary school students to produce news

EYE CARE WEEK 2008

Eye Care Week 2008 reached out to preschools for the very first time through a "Keep Myopia Away, Go Outdoors and Play" event at HealthZone. The event was attended by 4,038 children from 56 preschools.

For the first time, a Roving Eye Competition

video clips on their schools' Eye Care Week activities saw over 40 submissions. Shortlisted entries were aired on Kids Central, with about 2,600 viewers casting their votes to select the winner.

CHILDHOOD INJURY PREVENTION PROGRAMME (CHIPP)

Five one-minute television clips of preschool children conducting a "safety day" at their preschools were shown on Okto over the December school holidays.

The initiative was well received by participating preschools and viewers alike. Close to 157,000 children aged 4 to 9 years were reached via the TV campaign, with each child seeing the interstitial clips an average of seven times.

A total of 172,000 parents were estimated to have seen the interstitial clips about four to five times.

CHAMPIONING EFFORTS RESULTING IN IMPROVED SCHOOL HEALTH (CHERISH) AWARD



A total of 160 primary schools, 139 secondary schools and 14 junior colleges participated in the CHERISH 2008 Award competition.

Two Platinum Awards and 30 Gold Awards were given out in the award ceremony, which was graced by Ms Grace Fu, Senior Minister of State, Ministry of National Development and Ministry of Education.

The CHERISH Conference was organised in July 2008 to give schools insights into the exemplary models of health promoting schools in Singapore and neighbouring countries. Prof Lawrence St Leger, an HMDP expert, was the keynote speaker.

To prepare schools for CHERISH, workshops on planning health promotion programmes were also conducted.

OUTREACH ACTIVITIES

SCHOOL-BASED OUTREACH

Preschools

Five training sessions called "Key Health Issues among Pre-School Children" were conducted.

The lecture-cum-workshop session provided teachers with key information on the concept of health promotion, oral health, food allergies, nutrition, childhood myopia and injury prevention. A total of 400 teachers attended.

Special Schools and Madrasahs

In 2008, the outreach teams actively began engaging special education schools and madrasahs. Existing programmes such as wellness programmes, parent education workshops and student-targeted competitions and events were extended to this group.

A poem-writing competition held in conjunction with WNTD and sexuality education workshops were customised for the madrasahs.

Interests and hobbies are a great way to keep fit. When we engage in exercise or healthy activities that we enjoy, we're more likely maintain these healthy habits.

Tertiary Institutions

HPB collaborated with ITE College East to organise a healthy lifestyle event in July 2008 to teach students about pertinent health issues, including smoking control, HIV/AIDS prevention and tips, physical activity and nutrition, through interactive games and activities.

A total of 6,000 students participated in the event.

TEACHERS' WELLNESS PROGRAMMES

In 2008, the following wellness programmes were conducted for teachers in partnership with the Ministry of Education (MOE):

- Four Olive Platinum sessions for teaching staff aged 45 years and above. The topics covered included osteoporosis and active ageing. Other ongoing programmes are the Healthy Festive Cooking sessions, Healthy Nutrition Workshops, two-day Wellness Workshops and cluster-based wellness programmes.



Teachers having a go at yoga

Jogging is a popular form of aerobic exercise. 30 minutes of physical activity five times a week can help you live longer and healthier. Not only will your heart get stronger, as it pumps more blood with each beat, you'll start to look and feel better!



- The inaugural Principals' Walk was attended by 500 principals and vice-principals.
- Six wellness programmes for 300 teachers covering topics such as the importance of good nutrition, sleep, physical activity and positive relationships.
- Six cluster-based wellness programmes for staff from 40 schools covering health-related topics and activities such as workplace ergonomics, Thera-Band exercises, cluster-friendly matches, home workouts and Latin dance.
- Five wellness sessions for staff in preschools and primary schools covering topics such as relaxation techniques, healthy eating and home workouts, with a supermarket tour to teach them about healthier food choices.

GRANTS

Pre-school Health Promotion Grant

The Pre-school Health Promotion Grant is provided to help preschools organise health promotion activities for pupils, their parents and staff. The programmes are chosen from HPB's list of commissioned vendors and include nutritional education, physical activity sessions, parenting workshops and parent-child sessions.

HPB subsidises 80% of the programme cost up to a maximum of \$1,000 per preschool. In total, 85 applications were received.

School Health Promotion Grant

The School Health Promotion Grant encourages schools to establish comprehensive health promotion programmes for staff and students. The grant is made available to schools which participate in the CHERISH Award scheme and have shown improvement in their award standing.

Schools can use the funding of \$5,000 provided on a co-funding basis for health-related wellness programmes for staff and students. Twenty-two primary schools and 35 secondary schools and junior colleges have applied for grants totalling \$180,000.

Youth Health Promotion Grant

The Youth Health Promotion Grant helps youth organisations initiate programmes and activities related to key youth health issues such as smoking, sexuality, nutrition, mental wellness and physical activity. The funding quantum is up to 80% of the project cost, or up to \$3,000, whichever is lower.

In 2008, 55 proposals were received from 52 community organisations. A total of 41 proposals were accepted. HPB provided consultancy services and resource support to aid the community organisations in the successful implementation of their projects.

Tertiary Institutions Health Promotion Grant (TIHPG)

TIHPG helps tertiary institutions in planning and organising health promotion programmes for their students.

In 2008, TIHPG supported the three ITE Colleges in the following health promotion projects:

- ITE College East Healthy Lifestyle Event
- ITE College Central Xtreme Fiesta 2008
- ITE College West and East D.A.R.E. Smoking Cessation Workshops

The projects covered topics such as HIV/AIDS prevention, smoking control and cessation, mental wellness, physical activity and healthy nutrition, reaching 8,900 students.

YOUTH ADVOLUTION FOR HEALTH (YAH)

YAH is an advocacy programme for youths to advocate a healthy lifestyle to their peers, by planning and implementing youth-oriented health campaigns and projects.

The YAH Project Funding scheme provides up to \$1,000 to youth groups to carry out projects incorporating one or more of the five health topics that form YAH's focus: leading a smoke-free lifestyle, sexual health, mental wellness, physical activity and nutrition.

In 2008, 36 YAH projects were implemented, reaching 41,298 youths.

They include the "Hey! Butts Off" peer-assisted learning programme which involved training sessions to equip student leaders with the knowledge and skills to conduct the four-week programme. A total of 381 student leaders and 101 teachers attended the sessions.



Keeping fit is a must when it comes to healthy living. But it doesn't have to be a chore. Activities like cycling, hiking, dancing or climbing stairs are just some of the ways we can maintain our fitness.



MAKE TIME FOR HEALTHY LIVING

With demanding deadlines and hectic schedules, a healthy lifestyle is sometimes far from mind. HPB makes healthy living a breeze by bringing health programmes to the workplace, and by engaging the general public through events and initiatives that focus on important aspects of health.

NUTRITION

FRUIT VENDING MACHINES

HPB introduced a vending machine that dispenses fruit during the “Eat 2 Fruit + 2 Veggies Every Day for Good Health” campaign in September.



A fruit vending machine

The machines dispense hygienically prepared and sealed cups of freshly cut apple, papaya, guava and pineapple at reasonable prices, offering a more convenient means of buying and eating fruit.

Other initiatives to increase fruit intake included promotional tie-ups with fruit suppliers for the Fruit-on-Order programme, where workplaces could have fruit delivered to them with no delivery charge.

During the campaign month, 162 outlets of major supermarkets such as Cold Storage, FairPrice and Shop & Save sold fruit and vegetables at discounted prices.



Health messages in supermarkets

Banners and signs were prominently displayed along aisles to educate shoppers on appropriate serving sizes of fruit and vegetables, as well as practical tips on how they could be incorporated into various dishes.

“WOK THE TALK”

“Wok the Talk” is a programme that leverages word-of-mouth as a teaching tool. Volunteers are trained to impart healthy eating messages and healthy culinary skills.



A “Wok the Talk” session in progress

After the sessions, these volunteers are appointed as ambassadors, and are expected to conduct cooking classes for their family, friends and colleagues, incorporating healthy eating messages that they have learnt.

Last year, 30 ambassadors joined the programme, conducting 32 cooking classes for 480 people within four months. A total of 95% of the participants remembered the key healthier eating messages.

PHYSICAL ACTIVITY

“FABULOUS”

HPB developed a strength-training routine entitled “FaBulouS” – an exercise routine that promotes Flexibility, Balance and muscular Strength – to prevent falls in older adults.

“FaBulouS” was officially launched by Mr Wong Kan Seng, Deputy Prime Minister and Minister for Home Affairs, in November at the “Grandparents’ Day Walk”, organised by the Council for Third Age. The launch saw 4,000 people engaging in the “FaBulouS” routine before they went on a 2km walk from the Esplanade Park to the Singapore Flyer.

DVDs and posters on the routine have been produced to popularise it. Workshops on “FaBulouS” have also been conducted for more than 300 lay exercise leaders in the community, as well as volunteers of several Voluntary Welfare Organisations (VWOs).

A total of 15 workshops were conducted for more than 800 members of the public.

GET ACTIVE WITH EASYFIT

EasyFit is a fun and fuss-free workout that promotes aerobic fitness and muscle strength. Similar to circuit training, EasyFit uses simple equipment and fitness accessories, under the guidance of a certified instructor.

It was piloted at a roadshow last October and is now held weekly in shopping malls such as United Square and Bukit Panjang Plaza, targeting office workers and residents in the vicinity.

Low-fat foods are one way we can trim the fat from our diet. However, remember to make sure that the low-fat foods you eat are low in calories and sugar as well. Healthy low-fat foods include tomatoes, egg white, watermelons, beans and wheat bread.

“COMMUNITY AEROBICS”

“Community Aerobics” is a combined initiative of HPB, NW CDC and the Cashew Women Executive Committee.

Launched on 31 July 2008 by Dr Vivian Balakrishnan, Minister for Community Development, Youth and Sports, the initiative promoted regular physical activity with weekly sessions held at Bukit Panjang Plaza, for the shoppers and residents living in the vicinity.



Outdoor community exercise sessions

In September, “Community Aerobics” was held at Jurong IMM mall on a weekly basis for shoppers.

“SOCCER FOR HEALTH”

“Soccer for Health” is a collaboration between HPB and An-Nur Mosque, supported by the Football Association of Singapore, the Woodlands Wellington Football Club, the Singapore Sports Council and the Northwest Mosque Cluster. The initiative encourages Malay males aged 30 years and above to engage in regular physical activity.

Since the programme took off in October, two soccer training centres have been set up, each with weekly training sessions attended by a regular group of about 40 participants.

SUBSTANCE ABUSE

NATIONAL SMOKING CONTROL CAMPAIGN 2008

The National Smoking Control Campaign 2008 targeted both youths and adults to encourage more Singaporeans to quit smoking.

A mass media campaign focusing on Chronic Obstructive Lung Disease (COLD) was launched to develop a greater awareness of the serious and debilitating impact of this disease and its link to smoking. The campaign featured the testimonial of Mr Yap Seng Khoon, a COLD sufferer for the past 20 years.



The heartland roadshows attracted over 5,000 participants



Smokers testing the amount of carbon monoxide in their breaths

Smokers were encouraged to quit smoking through a series of workplace and community initiatives, with more than 26,000 participants and over 1,000 smokers receiving smoking cessation advice and tips.

FRESH AIR FOR WOMEN

In 2008, the Fresh Air For Women (FAFW) programme reached out to more than 42,000 women aged 18 to 29 years, and encouraged them to avoid or quit the smoking habit through the following initiatives:

- The "Do It All for Love Valentine's Day Challenge" was held in February at Raffles Place Park. Participants who were smokers were encouraged to quit, with the support of their loved ones. Those who joined the Challenge had to remain smoke-free for two weeks and receive quit advice from professional Quit Advisors. The event featured a series of telematch games and attracted 40 participants. Two finalists won attractive prizes and shared their successful quitting experiences with the media.



The story of Zita Roberts was shared with young women to inspire them towards a smoke-free life

- HPB conducted a marketing campaign based on the story of Zita Roberts, a lung cancer patient and smoker who spent her last days sharing her smoke-free message. More than 18,000 gerberas were distributed to young women, who were directed to www.freshair.sg to read Zita's story. The campaign reminded women of the magnitude

of the loss that their loved ones could suffer as a result of their smoking.

- To inspire more women to quit smoking, FAFW launched the "Glass House" event in April, where Ms Cheyenne Lu, aged 26, stayed smoke-free for three days, while living in a glass house situated along Orchard Road. Professional Quit Advisors personalised a quit plan and activities such as pilates, stretching exercises and make-up sessions to distract her from the urge to smoke. More than 1,000 members of public pledged their support for Ms Lu. The event was widely covered by local and regional media.

MUHARAM CHALLENGE 2009

In conjunction with Awal Muharam – the Muslim New Year – the fifth annual Muharam Challenge was launched on 28 December 2008 to encourage Malay smokers to quit smoking.

Smokers were equipped with the knowledge and skills to cope with their smoking habit through workshops and activities – with the help of professional Quit Advisors – while their family members and supporters learned techniques to help the smokers overcome their cravings.

All in all, 15% of the 538 participating smokers successfully quit by the end of the programme.



Launch of Muharam Challenge 2009

Mental health is just as important as physical health, and should not be neglected. Cultivating good mental health habits will build your resilience when coping with life's challenges.



MENTAL HEALTH EDUCATION

"MIND YOUR RELATIONSHIPS" WORLD MENTAL HEALTH DAY EVENT

A total of 2,500 people attended the Mind Your Relationships Outdoor Movie Event on 4 October 2008 at Fort Canning Park to mark World Mental Health Day.

The event was a fun-filled day of contests, games, fringe activities and a movie screening. It was held to encourage attendees to spend quality time together and, in doing so, discover how important and enriching a strong social support network can be for their mental well-being. The event also sought to motivate attendees to build positive relationships.



The outdoor movie event attracted 2,500 people

NURTURE YOUR MIND FOR OLDER PERSONS (NYMOP)

In view of the ageing population and calls to prepare Singaporeans for the Silver Tsunami, a mental health education programme, NYMOP, was introduced in April for persons aged 50 years and above.

The programme has been designed as a preventive model to reduce the risk of and enhance the protective factors against mental illness. It engages participants to revisit positive memories, rejuvenate relationships and manage change through music and movies, to motivate them to adopt a positive and healthy attitude towards ageing.

The Singapore Soka Association (SSA) and the National Library were among the first organisations to bring NYMOP to their members as well as the public. To date, more than 1,650 older persons have participated and benefitted from the programme.



Participants at an NYMOP session

"POSITIVE RELATIONSHIPS FOR A HEALTHY MIND" CAMPAIGN

In 2008, HPB's mental well-being awareness programme focused on the importance of positive relationships and encouraged individuals to cultivate a strong social support network to enhance their mental well-being.

The year-long integrated communication plan with the theme, "Mind Your Relationships", was conducted between April 2008 and March 2009. The campaign involved the use of monthly Zo cards and mass media to reach the general public.

Face-to-face activities were also brought to specific target groups – working adults via their workplaces and older adults through community platforms.

Post-campaign survey results showed that 49% of the respondents had seen at least one or more of the media items and 44% recalled seeing the television commercial, which featured animated monkeys discussing the importance of positive relationships for mental well-being.



The "Mind Your Relationships" campaign featured the innovative use of claymation techniques

COMMUNICABLE DISEASE EDUCATION

"LOVE AMPLIFIED" WORLD AIDS DAY CONCERT



"Love Amplified" attracted 3,600 participants and featured well-known local artistes and performers

In December, HPB organised "Love Amplified", Singapore's first large-scale World AIDS Day concert. The event brought together well-known Singaporean artistes such as Stefanie Sun and the Dim Sum Dollies to generate greater awareness about HIV among young adults.

Approximately 3,600 people attended the concert at Fort Canning Park, and were entertained by music, video and dance performances, which featured educational messages about HIV/AIDS.

A post-event survey among concert-goers showed that 86.8% of the respondents were aware of at least two ways to prevent HIV, and 75.3% of the respondents had at least two accepting attitudes towards people living with HIV.

Nutrition is a fundamental part of healthy living. In fact, a healthy diet may reduce the risk of chronic diseases such as coronary heart disease, stroke, diabetes, obesity and certain forms of cancer. Moderate your intake of fat, cholesterol, salt and sugar, and make sure you have an adequate intake of carbohydrates, protein, dietary fibre, vitamins and minerals.



HETEROSEXUAL MEN OUTREACH

Heterosexual men make up nearly 90% of all persons diagnosed with HIV in Singapore. Tailored approaches were used to reach out to both older Chinese-speaking men and young working professionals.

Older men were reached through print advertisements, cinema commercials and outreach events. The Department of Sexually Transmitted Infection Control hotline number recorded a nine-fold increase in calls during the campaign.

Marketing efforts targeting young professionals corrected the misconception that young, healthy looking adults do not get HIV. Print advertisements were published in various newspapers and men's magazines.

Creative events were also used to reach out to these men. For instance, talents acting as beauty pageant contestants were deployed to various popular night spots. Under the pretext of asking the men to vote for them, the talents asked the men they approached to assess whether they had HIV.

Most of the men responded correctly that you can never tell if a person has HIV from their physical appearance.

TRULY GORGEOUS WOMEN'S HEALTH EVENT

In February, the Truly Gorgeous concept store was set up in VivoCity and Parkway Parade, reaching 5,000 women.

The store was the first time HPB combined different health messages in a single event to target a specific adult audience – women aged 21 to 40 years.

The Truly Gorgeous store capitalised on women's enjoyment of shopping to communicate messages about sexual health, cervical cancer and the harms of smoking. Tags with engaging health messages were attached to accessories and merchandise sponsored by various partners.

Mini workshop sessions were carried out at the store for more in-depth discussion on the three health issues relevant to women.



Truly Gorgeous concept store

WORKPLACE OUTREACH

SINGAPORE HEALTH AWARDS

The Singapore HEALTH Awards presentation ceremony was held on 20 November 2008 at the Suntec Singapore International Convention and Exhibition Centre. A total of

750 award recipients and guests attended the ceremony, where Minister for Health, Mr Khaw Boon Wan, was the Guest of Honour.

In total, 358 organisations were awarded the Singapore HEALTH Award 2008. This year, 22% of 2006's Gold Award winners progressed to the Platinum Award category, setting a record number of Platinum winners, while 27% of 2006's award winners achieved a higher award.



Schering-Plough Ltd Managing Director Dr Gaetan Angoh receives the Platinum Award from Minister for Health, Mr Khaw Boon Wan

A new sub-category award recognising workplaces with exemplary mental well-being education programmes was also introduced. Under the Individual Award categories, there were four recipients for the HEALTH Leader Award, and 13 recipients for the Health Promoter Award.

THE 8TH NATIONAL CONFERENCE ON WORKPLACE HEALTH PROMOTION

The 8th National Conference on Workplace Health Promotion was held from 20 to 21 November 2008, with 250 participants.

The conference theme was "Building Healthy Organisations". The conference covered topics such as forging successful partnerships, employee engagement and best practice sharing sessions from local and overseas workplace health facilitators.

Dr Graham Lowe, a Canadian expert in the area of workplace health and organisation culture, delivered the keynote address on the role of organisational culture and leadership in creating a healthy organisation.



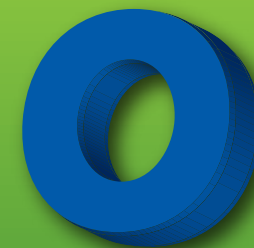
Dr Graham Lowe, an expert in workplace health and organisation culture from Canada, delivers the keynote address

A pre-conference seminar, "Leading, with Mental Wellbeing in Mind", was held on 19 November 2008, and highlighted the importance of mental well-being and strategies to achieve a mentally healthy workforce.

WORKPLACE HEALTH FOR SMALL AND MEDIUM ENTERPRISES (SMEs)

The department embarked on a pioneering effort to bring health programmes to the doorsteps of SMEs, in collaboration with commercial and industrial building owners.

Oral health is important for every individual, no matter what their age is. Take care of your oral health by brushing regularly, consuming a balanced diet and making regular visits to the dentist.



Health screenings and initiatives such as jogging groups and mental well-being and HIV education programmes were conducted for tenants and their employees at the building premises.

NATIONAL TRIPARTITE COMMITTEE ON WORKPLACE HEALTH

A National Tripartite Committee on Workplace Health was formed in January 2009 to review the existing strategies



Workplace health programme participants take a stretch break

and health promotion programmes for workplaces. Its aim is to formulate new strategies to make the workplace an important setting to influence and enhance the health and productivity of employees.

The Tripartite Committee aims to promote a healthy lifestyle among all employees and engage industry sectors to adopt workplace health promotion policies. It will build upon the achievements of the past decade to promote a healthy lifestyle and more effective chronic disease management through workplace health screening.

Peers influence the decisions we make regarding our health. While our peers can encourage us to make the right choices, peer pressure can also cause us to make the wrong ones, such as drug abuse, smoking and unhealthy eating habits. This is why we should always make the right healthy decisions regardless of what our peers think.



The Tripartite Committee is headed by Mr Lucas Chow, Chairman of HPB, and is co-chaired by Mr Yeo Guat Kwang, Director, Quality Worklife Department, National Trade Unions Congress.

The committee includes Chief Executive Officers (CEOs) of private companies, union leaders and high-level representatives from HPB, MOH, the Ministry of Manpower, SPRING Singapore, the Singapore National Employers Federation, the Association of Small and Medium Enterprises and the Singapore Manufacturers' Federation.

COMMUNITY OUTREACH

COMMUNITY HEALTH PROMOTION GRANT

The Community Health Promotion Grant was instituted to help community groups develop their vast potential for health promotion and outreach. Last year, 30 community organisations made use of the grant to kick-start a series of health initiatives to encourage their members to take steps towards a healthy lifestyle.

More than 200 representatives from grassroots and voluntary welfare organisations attended briefing sessions to learn more about the funding scheme and different approaches to implementing community health promotion programmes.



Representatives from grassroots organisations at a grant briefing



Health events provided opportunities for the public to learn more about health



Counsellors conducted smokerlyser tests and provided valuable tips on how to quit smoking

The grant was also presented to the senior managers of 84 constituencies to garner their support in encouraging the community organisations within their constituency to take an active role in promoting health.

OUTREACH TO MALAY COMMUNITY

HPB continued collaborating with PA to conduct more than 30 healthy cooking workshops for the Muslim community in community clubs and mosques. Besides nutritional messages, these workshops also imparted information on physical activity, mental well-being and women's health.

HPB also worked with Malay-Muslim organisations such as Majlis Ugama Islam Singapura (MUIS) and mosques on activities such as culinary training for mosque volunteers, exercise sessions, cooking demonstrations and interactive exhibitions on how to adopt a healthy lifestyle.



Volunteers from mosques attended training on healthy cooking

COLLABORATION WITH PARTNERS

The department established long-term collaborations with key partners such as the Community Development Councils, the Council for Third Age and the Singapore Heart Foundation (SHF), and leveraged their events to promote our health initiatives.

These include roadshows, the Active Ageing Carnival, the Go Red for Women campaign and World Heart Day by SHF.

The department also participated in 60 events in 2008, including the Lianhe Wanbao Beauty and Healthcare fair and the Health & You exhibition and seminar organised by the Singapore Press Holdings.

PLAN TO AGE WITH GRACE AND HEALTH

Age doesn't have to mean slowing down. HPB encourages older adults to attend regular screenings, manage disease conditions and foster social relationships for better health in their silver years.

Quit smoking. Smoking is strongly linked to cardiovascular diseases, emphysema, erectile dysfunction, reduced memory, brain shrinkage, and oral, lung, kidney, head and neck, breast, bladder, oesophagus, and stomach cancer.



HEALTHY AGEING DIVISION (HAD)

HAD was formed on 1 October 2008 as an expansion of the Active Health Management Department, formerly subsumed under the Adult Health Division.

The new division's objective is to develop and implement interlocking strategies to meet the health promotion needs of Singapore's ageing population.

Screening forms the basis of the division's strategic framework, which is further strengthened by post-screening holistic and integrated follow-up programmes.

The Integrated Screening Department focuses on programme management and the promotion of appropriate, regular and evidence-based screenings at a national level.

The Programme Integration Department delivers the division's programmes in an integrated manner at a national level, by developing partnerships with healthcare and allied healthcare stakeholders.

The Patient Education Department focuses on bringing timely and effective patient education to persons with chronic conditions, as well as those with pre-diabetes, through small group and individual counselling sessions.

BREAST AND CERVICAL SCREEN SINGAPORE

HAD runs two national cancer screening programmes for women – BreastScreen Singapore (BSS) and Cervical Screen Singapore. In 2008, of the 43,115 women screened for breast cancer, 71 were found to have

pre-invasive cancers and received treatment early. For cervical cancer screening, 21,511 women were screened and 29 women were found to have pre-invasive cervical cancer in 2008.

BSS conducted the inaugural Frontliner Course for 51 radiographers from both public and private X-ray centres as part of its continuing education efforts. Ten screening centres were also audited in September and October 2008, with eight of the centres meeting the programme standards for quality.



Workshop for breast screening frontliners

INTEGRATED SCREENING PROGRAMME (ISP)

The nation-wide ISP encourages Singaporeans aged 40 years and above to attend health screenings for chronic diseases at Chronic Disease Management Programme (CDMP)-registered General Practitioner (GP) clinics.

Laboratory tests under ISP are free for Singaporeans in selected socioeconomic groups. Seventy percent of Singaporeans screened as of December 2008 did not have to pay for tests. Of those screened, 80% had at least one abnormal result requiring follow-up medical attention.

The integrated screening model has been extended to the Wellness Programme, which carries out community-based screenings.

NURSE EDUCATOR PROGRAMME

Since the launch of the Nurse Educator Programme in March 2008, 40 talks on chronic disease management have been provided for community groups and workplaces, reaching 1,400 people.

Talks on managing diabetes, hypertension, high cholesterol and obesity, as well as their risk factors, have been conducted for groups at Community Clubs, Wellness Centres, the Singapore Soka Association, the National Aluminate Corporation and the Women's Initiative for Ageing Successfully.

Nurse Educators also ran 13 workshops for people with hypertension, and three for diabetics. Each workshop is conducted over three sessions, where participants are taught the facts of their condition and how to make lifestyle changes to improve their health.



A Nurse Educator at the Wellness Carnival

DIABETES EDUCATION CAMPAIGN

HPB launched the Diabetes Education Campaign to debunk the myths and misconceptions regarding diabetes, highlight its serious health consequences and promote early detection through regular screening.

The campaign comprised advertising and media initiatives, a roving interactive roadshow and lunchtime talks on diabetes at workplaces.

The campaign reached 84% of adults aged 40 years and above. HPB received a 60-fold increase in public calls regarding diabetes and screenings. A post-campaign survey revealed an increase in knowledge of the condition and its management among the general population as well as diabetics.



Giant foot ambient marketing display in Raffles Place

THE PRE-DIABETES INTERVENTION PROGRAMME

HPB will launch a pre-diabetes intervention programme in FY2009 to prevent or reduce the risk of progression to Type 2 diabetes among Singaporeans. The programme will comprise individual counselling sessions, addressing barriers to changes in lifestyle and referrals to community-based physical activity and nutrition programmes.

Relaxation is important in today's fast-paced world. Take time to breathe, engage in your favourite hobbies or activities, and strengthen your social connections for better overall well-being.



REACHING THE PUBLIC EFFECTIVELY

The right information is vital when it comes to leading a healthy lifestyle. HPB utilises the latest and most effective forms of media to reach out to individuals and empower them to make the best health choices.



Screenings are very important for one's health, and should never be ignored. They can result in the early detection and treatment of certain diseases and conditions, which may otherwise cause more damage to the body if left undetected.



CORPORATE MARKETING

MENTAL HEALTH CAMPAIGN

A marketing campaign to promote mental health employed innovative claymation techniques to emphasise the importance of relationships. A catchy radio jingle and a unique TV commercial were developed to reach out to the general population.

Online initiatives such as a “Lucky Got Kaki” microsite, an online banner, a YouTube video and a video competition were also developed to engage the online community.



Innovative mental health TV commercials featured monkeys and fish

The TV commercial emerged as a finalist for Viewer’s Choice 2008. The online banner on yahoo.sg achieved a click-through rate of 1.12%, surpassing industry standards.

AIDS CAMPAIGN

AIDS Drama – “By My Side”

A 20-episode TV drama entitled “By My Side” was produced for MediaCorp Channel 8 to increase the awareness of HIV/AIDS and de-stigmatise HIV/AIDS patients and their caregivers in the community.

The drama featured veteran artistes such as Zoe Tay and Chen Hanwei, and attracted nearly 2 million viewers, making it the top programme across all MediaCorp



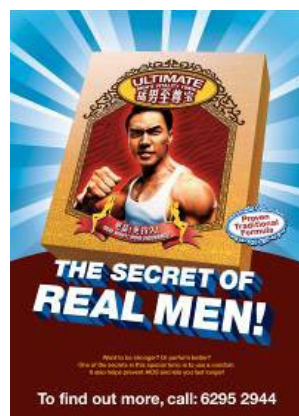
Publicity for the 20-episode drama titled “By My Side”

channels during the telecast period.

To reinforce key HIV/AIDS education messages, an interstitial piece featuring male protagonist Chen Hanwei was aired on Channel 8 during the telecast period.

Pre- and post-evaluation surveys revealed an overall increase in the knowledge of HIV/AIDS.

The findings also showed a significant improvement in positive attitudes and reduced stigmatisation of HIV/AIDS patients.



Publicity for the campaign

Blue-collar Males

A campaign aimed at blue-collar males tapped the behavioural patterns of the target group by featuring the HIV/AIDS prevention message on the packaging for “Ultimate Vitality Tonic”, a mock aphrodisiac product.

The campaign utilised press advertisements, radio commercials, a short film and on-ground activities at places such as red light districts to communicate the key message – “Play it safe”.

CORPORATE COMMUNICATIONS

In 2008, HPB effectively reached the public through 1,149 media stories in all the main media and magazines, covering our campaigns, activities and health messages.

The department hosted 32 visits by representatives from diverse organisations in 2008, as part of HPB’s goal to become a centre of excellence for health promotion and education. These included visits by public health officials from Mongolia, China, East Java, Malaysia and Korea, as well as students from institutions such as NUS, Zayed University of the United Arab Emirates, Pochon Cha University of Korea and the University of Sydney, Australia.

Corporate Communications also completed the HPB branding exercise.

CORPORATE COMMUNITY INVOLVEMENT PROGRAMME

HPB continued supporting Yong-En Care Centre as its official charity in 2008. Yong-En Care Centre caters primarily to the elderly community as well as children living in Chinatown. The Board raised \$22,410.45 for the centre through a variety of fund-raising activities.

CORPORATE PARTNERSHIP MANAGEMENT

The Corporate Partnership Management department proactively establishes strategic alliances with the private sector to extend the reach of HPB’s programmes and initiatives.

HPB’s partnerships reached a new peak in 2008, with more than 35 programmes and projects being supported by over 30 corporate partners. They include NHLC 2008,

Talk to your GP for credible information about your health, always.



the “Love Amplified” World AIDS Day Concert, WNTD 2008 and the National Smoking Control Campaign 2008, School Health Fairs, as well as fitness programmes such as Fitness @ Work and i-Run.



NHLC 2008 was supported by partners such as Nestle and F&N

HPB’s major corporate partners include Nestle, F&N, NTUC Income, California Fitness, Subway, Keppel Offshore & Marine, Prosafe Production, Levi’s®, Pfizer, Johnson & Johnson, Wyeth, Yoshinoya, and TimeZone.

RESOURCE DEVELOPMENT SERVICES (RDS)

In 2008, RDS developed more than 700 resources and recorded more than 13.3 million page views for the HPB website. Other highlights include:



Part of the interactive exhibition on diabetes

Unwinding is something we should never forget to do. It allows us to relieve stress and improve our mental health.



Resources for the Diabetes Education Campaign

An interactive exhibition, two educational booklets and a website on diabetes were developed, targeting healthy and at-risk individuals, as well as those with diabetes.

Positive Living Exhibition

This roving art exhibition showcased the works of People Living with HIV (PLHIV), with the objective of promoting



Art by PLHIV on display

a better understanding towards PLHIV among the general public.

The exhibition was displayed in 15 locations and attracted more than 40,000 people.



Thematic posters for NHLC 2008

NHLC 2008

RDS produced collaterals that would appeal to NHLC 2008's target audience of youths. These included a specially-designed t-shirt, laptop stickers and thematic posters.

HPB Website Revamp

The revamped HPB website incorporates Web 2.0 features such as personalisation, blogs, forums, podcasts, vodcasts, widgets and web analytic tools.

Usability studies have also been conducted to provide a smoother user experience, as well as to meet the information needs of different target audiences.

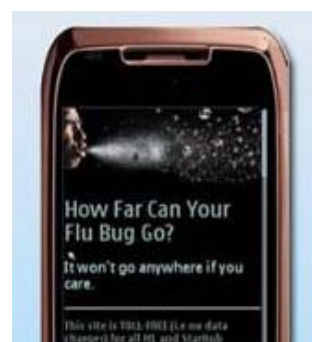


Screenshots of the new HPB website

Free Internet Content on Mobile Phones

In 2008, HPB became the first government agency in the region to provide toll-free mobile Internet content, to support the flu prevention campaign.

M1 and StarHub mobile subscribers in Singapore were able to access flu prevention messages in four languages at their convenience – anytime and anywhere.



Flu prevention messages were made available to mobile phone subscribers free of charge

HEALTH INFORMATION

HealthZone

HealthZone, the only healthy lifestyle exhibition centre in Singapore, received 65,000 visitors and conducted 1,370 skills-based health education sessions in FY2008.



The Exciting Eatery zone was upgraded to reflect the current dietary trends and eating habits of Singaporeans. Key messages regarding food-serving sizes, nutrition and smart food shopping are now communicated via interactive exhibits and multimedia programmes.

HealthZone also implemented a new membership scheme for preschools, and launched Project NutriWorkz – an initiative for secondary school students.

New health education modules were also developed in support of MOE's Learning Journey programme for primary and secondary school students.



New interactive exhibits at the upgraded Exciting Eatery



HEALTHLINE

HealthLine is a toll-free telephone information service that supports HPB's

major campaigns and health promotion programmes, and provides personal advice and counselling regarding health matters and behaviour by trained nurse advisers.

In FY2008, HealthLine received 49,185 calls. Of these, 8,647 calls were made regarding the new Integrated Screening Programme, which encourages Singaporean adults aged 40 years and above to screen for chronic diseases.

HealthLine also piloted a project with the Student Health Centre to answer enquiries from parents requiring health information or advice. A total of 3,317 calls were received, comprising 33% of all SHC calls received.

In addition, 2,711 calls about quitting smoking were also received by the QuitLine service operated by the HealthLine call centre.



HEALTH INFORMATION CENTRE (HIC)

HIC, a one-stop centre for health promotion resources, now offers several roving exhibition packages to raise the awareness

of health conditions that are more prevalent in Singapore.

These health exhibits have been viewed by approximately 54,000 people at various community libraries, hospitals and workplaces.

Vegetables are an essential part of a healthy diet. Most vegetables are high in water and fibre, but comparatively low in calories. As a result, they create the feeling of fullness without the high-calorie content of high-fat foods. Like fruit, they're also excellent sources of vitamins and minerals, as well as cancer-preventing phytochemicals.



In 2008, HIC introduced a new Personal membership scheme, empowering Singapore Citizens and Permanent Residents above 18 years of age with the resources to help them make decisions about their own health.



Roving exhibition at the Tampines Regional Library

HIC also developed and launched a new resource management system to allow online users to search HPB's database of print materials, book print materials for their health promotion programmes and check the status of their bookings via the Internet.

WORLD HEALTH ORGANIZATION COLLABORATING CENTRE (WHOCC) FOR HEALTH PROMOTION & DISEASE PREVENTION

HPB was designated as a WHOCC for Health Promotion and Disease Prevention for a period of four years in January 2007. As a WHOCC, HPB works closely with the WHO Regional Office for the Western Pacific (WPRO)

to improve the capacity of health promotion practitioners in the region as well as to strengthen inter-regional collaboration on health promotion initiatives.

In FY2008, WHOCC collaborated with WHO/WPRO on the following:

HPB officers were invited to present and share our technical experiences at 10 WHO/WPRO meetings and workshops, including the "WHO Framework Convention on Tobacco Control: 3rd Session of the Conference of Parties", the "WPRO Regional Workshops on Tobacco Policies and Programme", the "Japan-WHO International Visitors Programme on NCD Prevention & Control", the "WHO FRESH Partners School Health Meeting", the "Regional Technical Consultation on the Global Strategy to Reduce the Harmful Use of Alcohol" and the "WPRO Health Promotion Leadership and Management (ProLead) Workshops".

To promote the WHO Healthy Cities Approach, HPB organised a one-day sharing session entitled "Healthy Cities for a Sustainable Future" on 23 June 2008 as a co-located event of the World Cities Summit organised by the Ministry of Environment and Water Resources and Ministry of National Development. The session attracted about 100 local and regional participants. Dr Linda Milan, Director,



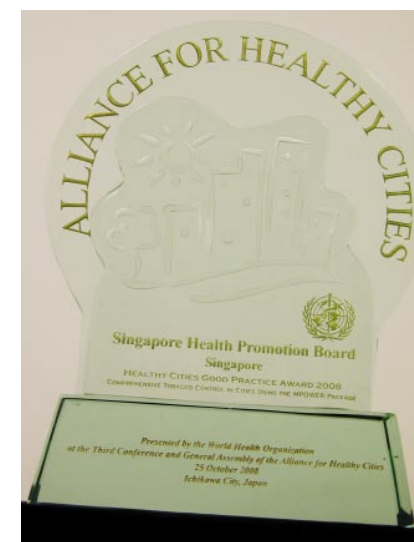
Healthy Cities for a Sustainable Future sharing session

Building Healthy Communities and Populations, WPRO, was the keynote speaker. Other speakers included Dr Keiko Nakamura (Secretariat for the Alliance for Healthy Cities), Mayor Sandra McCarthy (Kiama Municipal Council, Australia) and Mayor Amy Khor (South West CDC, Singapore), who shared invaluable insights on building healthy communities.

HPB organised a five-day programme for six WHO Fellows from Mongolia. The Fellows were keen to learn about HPB's corporate structure and governance, and how HPB plans, implements and evaluates health promotion programmes. HPB also hosted a visit from Dr Si Thu Win Tin, Director from the Ministry of Health, Nauru, who is interested to find out more about HPB's programmes on non-communicable diseases and tobacco control.

AWARDS

In October 2008, HPB won the "WHO Healthy Cities Good Practice Award 2008 – Comprehensive Tobacco Control in Cities using the MPOWER Package", in recognition of its extensive multi-pronged tobacco control programmes.



WHO Healthy Cities Good Practice Award 2008

ROBUST RESEARCH, SUPPORT AND PROCESSES

Promoting health effectively requires a multi-disciplinary strategy backed by organisational soundness. HPB constantly engages in research and development, refines its administrative capabilities and improves its services – all in the quest for a healthier Singapore.

Weight management is an important aspect of health. Combining healthy eating habits with a proper exercise regimen is an effective way to maintain a healthy body weight.



RESEARCH & STRATEGIC PLANNING DIVISION

RESEARCH & EVALUATION (R&E) DEPARTMENT

Notable studies conducted by R&E in FY2008 include the annual Omnibus Survey, for the purpose of more effective programme development and planning.

The department also conducted focus group discussions to understand health issues among the elderly and those transitioning to later life, as well as to develop appropriate and effective initiatives to prevent smoking initiation among young women who are non-smokers, and encourage cessation among smokers.

R&E also conducted surveys which showed the Diabetes Education Campaign to be successful in increasing knowledge regarding Type 2 diabetes, prevention measures and disease complications.

STRATEGIC PLANNING DEPARTMENT (SPD)

In 2008, SPD served a Secretariat role for the HPB Taskforce chaired by the Chairman of HPB. This Taskforce, comprising members of the Board as well as CEO and Divisional Directors, provided guidance to HPB on the implementation of the recommendations made by MOH's Active Health Management Subcommittee Workgroup 3 (AHM).

The department successfully introduced a three-year rolling work-plan framework to facilitate long-term planning. SPD also facilitated and completed an inter-divisional brainstorming session to generate ideas for the work plans.

SPD and R&E embarked on HPB's first cost-effectiveness analysis project to assess the National Smoking Control Programme. A health economist from the University of New South Wales, Australia, was engaged for this project.

In setting the strategic direction of the new HAD in 2008, SPD, along with relevant partners, completed the Elderly Strategy Plan (2009-2013), based on evidence-informed strategies.

The plan will serve as a guide to support the division's initiatives.

MONITORING AND SURVEILLANCE DEPARTMENT (MSD)

In 2008, MSD started developing an Information Technology (IT) system to support the administration and management of the Health Behaviour Surveillance, which will provide timely and relevant information regarding the health behaviours of Singaporeans, and contribute towards the development and evaluation of policies to improve the population's health.



HPB leadership crafting the HPB Vision 2018 mind-map

The department continued to monitor corporate Key Performance Indicators (KPIs) for HPB's programmes. These include the timely reporting of results to the top management, analyses of key trends, and reviews of corporate KPIs and targets to ensure their relevance to HPB's goals and strategies.

INTEGRATED INFORMATION MANAGEMENT (IIM) DEPARTMENT

IIM awarded the Health Info Hub (HIH) project – scheduled to be completed in September 2009 – to National Computer Systems Pte Ltd. The project pools together data from various sources in HPB into a common information repository to facilitate better use of information.

A spin-off from the HIH project is the Data Mining Project, which will mine the data in HPB's repositories. IIM also continued its existing work in information management for BSS and Cervical Screen Singapore, Integrated Screening Singapore and the National Immunisation Registry.

eXercising regularly is part of a healthy lifestyle. Apart from aerobic activity, engage in anaerobic activity such as press-ups, pull-ups or squats to build stronger muscles and speed up your metabolic rate.



NATIONAL REGISTRY OF DISEASES OFFICE (NRDO)

In 2008, NRDO won the "Best Poster" prize for a poster titled "Survival of End Stage Renal Failure Patients on Dialysis with Diabetic Nephropathy in Singapore (1999-2006)" at the Singapore Disease Management Conference.

The department was subsequently invited by MOH to deliver an oral presentation titled "Making Better Public Health Decisions – National Chronic Disease Information Network" at the Healthcare Information and Management Systems Society Conference in Hong Kong.

NRDO also published two renal registry reports and one cancer registry report. In addition, the department shared their expertise in setting up cancer registries with visitors from the Macau and Brunei health ministries.



Poster presented at the Singapore Disease Management Conference

CHIEF INFORMATION OFFICER'S OFFICE (CIOO)

In 2008, CIOO continued to promote interaction, collaboration and knowledge sharing among HPB staff, by building viable and sustainable Knowledge Bases for various user groups of users.

CIOO worked with SDS to develop the Community of Practice for dental therapists, who are posted to different locations across the island to share their work processes and experiences.

The department began work on HPB's third Infocomm Technology (ICT) Master Plan for FY2009 to FY2013, taking into consideration HPB's new key roles and MOH's focus on chronic disease management and mental health.

The ICT Blueprint focuses on the following areas:

- Using ICTs to maximise workplace efficiency
- Empowering Singaporeans to manage health actively
- Fostering collaborations with our partners to create a conducive environment for health
- Being a thought leader in health promotion and disease prevention

Ten application systems and one infrastructure upgrade were identified in the ICT Blueprint.

These include key initiatives such as National Health Portal Phases 2 and 3, Virtual HealthZone, the Citizens and Partners Relationship Management System, Partners Connect and the National Screening System.

Other new initiatives include:

- Breathe.sg to support NHLC 2008
- The pilot Customer Relationship Management System to support three health promotion programmes: the

"Wok the Talk" healthy cooking demonstrations, Frenzy Cross Sell for Fitness @ Work and Smoking Facebook to de-normalise smoking

- Integrated Screening System Phase 1 was implemented to allow CDMP clinics to check their clients' subsidy eligibility
- A programme-based Activity Costing System was developed as a costing framework for HPB
- Knowledge Portal Phase 1 was launched to formalise the framework and structure for HPB staff to file records and e-mails for knowledge retention
- National Health Portal Phase 1a was implemented for selected patients to put in their health information for self-management

The key projects scheduled for completion in 2009 are:

- The Corporate Resource System, which will be an integrated Human Resources (HR), finance and administration system
- HIH to consolidate key information for the purpose of trend analysis and KPI monitoring
- The Health Behaviour Surveillance System to collect and analyse data for monitoring the key health behaviours of Singaporeans
- The enhancement of the National Registry of Diseases' system security features
- The development of a centralised Infrastructure to host HPB's application systems

In 2008, CIOO assisted HPB in transitioning to the Standard ICT Operating Environment (SOEeasy), which is a public sector-wide initiative. This involved harmonising desktop, messaging and network environments across all government agencies to promote innovation and enhance productivity.

The transition will be completed by 2010.

CAREER AND TALENT DEVELOPMENT AT HPB

CAREER AND TRAINING MAPS

Career maps for the different schemes of service were launched under the career development framework to provide staff at all levels with a clearer understanding of their career progression. Possible vertical and lateral career movements across departments or divisions were also presented to staff.

Training roadmaps demonstrating how training areas and programmes are mapped to functional areas were developed to identify and address skills and knowledge gaps for more targeted training.

To prepare our mature workers to stay employable beyond the age of 62 years, HPB also launched the Mature Workers Framework. Its theme, "**GOLDEN**", represents **GO**od Health, **L**ifelong Learning & Employability, **D**ollar Sense, **E**mootional and Mental Well-Being, and **B**uilding Social **N**etworks.

SCHOLARSHIPS

The HPB mid-term undergraduate scholarship programme was launched in April 2008.

Local scholarships were awarded to two promising undergraduates who excel academically and possess a keen interest to embark on a career in health promotion.

Youths are our future. Ensuring that our youths maintain healthy lifestyles even into adulthood is of the utmost importance to HPB, because this means a healthier future for Singapore.



STAFF WELFARE AND BENEFITS

HPB EMPLOYEES' COLLECTIVE AGREEMENT 2009

In January 2009, HPB concluded the negotiation of a new collective agreement with the Amalgamated Union of Statutory Board Employees (AUSBE).

Staff were given benefit enhancements, such as more pro-family leave benefits, driving allowances for Division IV officers, enhanced Long Service Awards and shoe allowances for uniformed staff.

HPB will continue to collaborate with AUSBE to sustain healthy levels of staff engagement, communication and investment.



Signing of the HPB Employees' Collective Agreement 2009 by Mr Lam Pin Woon, CEO, HPB, and Mr Abdul Rahim Farid, President of AUSBE

Zest for life comes from healthy living. When you're healthy, you feel better, work better and play better. It's a simple equation with extraordinary results.



NEW EQUIPMENT FOR HPB GYMNASIUM

To encourage staff to stay fit and healthy, the HPB gym was refitted with three new treadmills and one cross-trainer in August 2008. Staff were delighted by the new equipment, and usage of the gym increased as a result.



The newly upgraded staff gym

INNOVATION

STAFF LOUNGE/INNOVATION ROOM



The new Staff Lounge/Innovation Room

HPB's Staff Lounge/Innovation Room is a place for staff to relax and interact with other colleagues. There is also a good selection of books available for loan.

The design of the room was based on ideas contributed by staff through an "Inno Room" Design Contest.

LEARNFEST AND SPEAKER SERIES

The Innovation Activist Group (IAG), comprising champions across different divisions, organised the annual HPB Learnfest to promote innovation and learning among staff.

A series of learning and innovation-related activities such as workshops, invited speaker series, learning journeys, games and contests were conducted over three months to cater to different levels of staff.

EFFICIENCY AND RISK MANAGEMENT

The Programme-based Activity Costing System (PACS) was implemented in FY2008 to enable the Board to understand what the direct and indirect costs associated with each programme were, and make informed decisions.

IMPROVEMENT IN PROCESSES

HPB and four other statutory boards have embarked on the implementation of a shared common resources system (CREST) covering finance, procurement and HR processes.

The shared system will enable the agencies to enjoy economies of scale using the same application platform and technological architecture, use new modules that are currently not available to them and streamline work processes based on best practices.

CREST is expected to go live in September 2009.

CORPORATE GOVERNANCE

The Finance Department conducted briefings for staff regarding the observations raised by the Auditor-General's Office (AGO) after their audit of the public sector. The briefings highlighted general internal control issues that were raised by AGO.

The Finance Department also conducts annual reviews of HPB's internal control processes.

RISK MANAGEMENT AND ASSESSMENT FRAMEWORK

HPB developed a detailed Risk Management and Assessment Framework encompassing:

- the identification of associated business risks and control features relating to identified business activities and processes
- a scoring system that ranked and evaluated business and control risks for significant programmes and systems
- a process that regularly monitors the risk assessment and updates it at least annually for all significant programmes, processes and systems

The framework was approved by the Audit and Risk Management Committee and HPB in September 2008. HPB's corporate risk profile will be updated on an ongoing basis to sustain ongoing risk management efforts, ensuring that risk scenarios remain relevant, while capturing new risks and maintaining the effectiveness of corresponding controls to mitigate identified risks.

ORGANISATIONAL EXCELLENCE



SINGAPORE QUALITY CLASS (SQC)

HPB achieved the SQC certification in 2008, signifying our attainment of a commendable level of overall organisational excellence. We continue to make improvements and breakthroughs in our structure, systems and processes, to bring HPB to a higher level of excellence.

THE SINGAPORE HR AWARDS

HPB is proud to have achieved special mention for the Leading HR Practices in Learning and Human Capital Development Award category at the Singapore HR Awards 2008.

The special mention recognises that HPB is on the right track in our talent development and management strategies, as well as our learning and development efforts.

SERVICE EXCELLENCE

The HPB Quality Service Award recognises and rewards employees who consistently demonstrate high standards of service excellence in their work.

In 2008, 40 staff received this award. A total of 33 staff also received the Excellent Service Award (EXSA) in 2008 – a national award that recognises individuals for their outstanding service.

In addition, five staff were presented with Employee of the Year Awards at the Public Service Week Observance Ceremony for consistently exhibiting HPB's values of care and concern, professionalism, integrity, respect, commitment and innovation at work.

FINANCIAL STATEMENTS

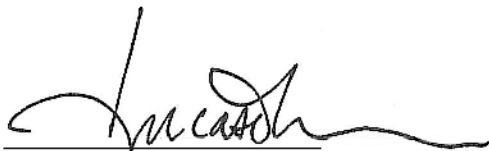
Statement by Health Promotion Board

In our opinion,

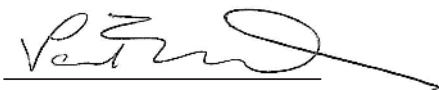
- (a) the financial statements of the Health Promotion Board (the "Board") set out on pages 67 to 89 are properly drawn up so as to give a true and fair view of the state of affairs of the Board as at 31 March 2009 and the results, changes in equity and cash flows of the Board for the year then ended on that date in accordance with the provisions of the Health Promotion Board Act (Chapter 122B) and Statutory Board Financial Reporting Standards; and
- (b) at the date of this statement, there are reasonable grounds to believe that the Board will be able to pay its debts as and when they fall due.

The Board has, on the date of this statement, authorised these financial statements for issue.

On behalf of the Board



Lucas Chow
Chairman



Lam Pin Woon
Chief Executive Officer

5 June 2009

Independent auditors' report

Member of the Board

Health Promotion Board

Report on the financial statements

We have audited the financial statements of Health Promotion Board (the "Board"), which comprise the balance sheet as at 31 March 2009, the income and expenditure statement, statement of changes in equity and cash flow statement for the year then ended, and a summary of significant accounting policies and other explanatory notes, as set out on pages 67 to 89. The financial statements for the financial year ended 31 March 2008 were audited by another firm of Certified Public Accountants whose report dated 30 June 2008 expressed an unqualified opinion on those financial statements.

Management's responsibility for the financial statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with the provisions of the Health Promotion Board Act (Chapter 122B) (the "Act") and Statutory Board Financial Reporting Standards.

Management has acknowledged that its responsibility includes:

- (a) designing, implementing and maintaining internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error;
- (b) selecting and applying appropriate accounting policies; and
- (c) making accounting estimates that are reasonable in the circumstances.

Auditors' responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with Singapore Standards on Auditing. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgement, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements 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 entity’s internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion:

- (a) the financial statements are properly drawn up in accordance with the provisions of the Act and Statutory Board Financial Reporting Standards to present fairly, in all material respects, the state of affairs of the Board as at 31 March 2009 and the results, changes in equity and cash flows of the Board for the year ended on that date; and
- (b) the accounting and other records required by the Act to be kept by the Board, including records of all assets of the Board whether purchased, donated or otherwise, have been properly kept in accordance with the provisions of the Act.

Report on other legal and regulatory requirements

During the course of our audit, nothing came to our notice that caused us to believe that the receipt, expenditure and investment of monies and the acquisition and disposal of assets by the Board during the year have not been in accordance with the provisions of the Act.


KPMG LLP
Public Accountants and
Certified Public Accountants

Singapore

5 June 2009

Balance Sheet

As at 31 March 2009

	Note	2008/2009 \$	2007/2008 \$
Share capital	7	8,354,132	3,743,963
Accumulated surplus	8	27,580,871	22,511,213
		35,935,003	26,255,176
Represented by:			
Non-current assets			
Property, plant and equipment	3	10,451,634	11,734,094
Intangible assets	4	14,022,448	9,962,891
		24,474,082	21,696,985
Current assets			
Receivables	5	304,624	553,520
Prepayments		368,510	296,965
Grant receivables	10	7,198,681	2,809,467
Cash and cash equivalents	6	54,796,474	52,475,214
		62,668,289	56,135,166
Current liabilities			
Payables and accruals	9	(22,941,236)	(23,401,390)
Grants received in advance	10	(3,161,902)	(821,043)
		(26,103,138)	(24,222,433)
Non-current liabilities			
Deferred capital grants	11	(16,040,970)	(17,981,628)
Obligations in respect of pension scheme	12	(9,063,260)	(9,372,914)
		(25,104,230)	(27,354,542)
		35,935,003	26,255,176

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

Income and expenditure statement

Year ended 31 March 2009

	Note	2008/2009 \$	2007/2008 \$
Income			
Service maintenance income		1,281,338	1,053,260
Interest income		354,011	877,606
Other income		784,631	656,652
		2,419,980	2,587,518
Expenditure			
Staff costs		(49,539,059)	(55,327,947)
Operating supplies and services		(22,012,871)	(17,331,674)
Publicity and public relations		(10,945,308)	(8,186,292)
Information technology services		(6,786,801)	(6,095,436)
Depreciation of property, plant and equipment		(3,478,784)	(3,021,113)
Input goods and services tax		(3,432,208)	(2,507,859)
Amortisation of intangible assets		(3,131,233)	(3,141,608)
Rental of premises		(3,015,847)	(3,050,137)
Subventions to polyclinics		(2,448,658)	(2,541,824)
Repairs and maintenance		(2,415,626)	(1,907,442)
Staff welfare and development		(2,227,594)	(2,289,920)
Other services and fees		(1,938,549)	(1,520,463)
Communications		(1,583,177)	(1,395,281)
Research and reviews		(708,485)	(165,964)
Board members' allowance		(71,250)	(68,750)
Audit fee		(39,000)	(40,000)
Loss on disposal of property, plant and equipment		(5,143)	(11,542)
		(113,779,593)	(108,603,252)
Deficit before grants		(111,359,613)	(106,015,734)
Grants			
Government operating grants	10	109,975,979	100,832,100
Non-government operating grants	10	395,719	597,245
Deferred government capital grants amortised	11	6,057,573	6,201,646
		116,429,271	107,630,991
Surplus for the year		5,069,658	1,615,257

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

Statement of changes in equity

Year ended 31 March 2009

	Share capital \$	Accumulated surplus \$	Total \$
At 1 April 2007	-	20,895,956	20,895,956
Surplus for the year	-	1,615,257	1,615,257
Issue of shares	3,743,963	-	3,743,963
At 31 March 2008	3,743,963	22,511,213	26,255,176
Surplus for the year	-	5,069,658	5,069,658
Issue of shares	4,610,169	-	4,610,169
At 31 March 2009	8,354,132	27,580,871	35,935,003

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

Cash flow statement

Year ended 31 March 2009

	Note	2008/2009 \$	2007/2008 \$
Operating activities			
Deficit before grants		(111,359,613)	(106,015,734)
Adjustments for:			
Depreciation of property, plant and equipment		3,478,784	3,021,113
Amortisation of intangible assets		3,131,233	3,141,608
Loss on disposal of property, plant and equipment		5,143	11,542
		(104,744,453)	(99,841,471)
Change in working capital:			
Receivables and prepayment		177,351	(259,312)
Payables and accruals		(460,154)	4,329,842
Obligations in respect of pension scheme		(309,654)	295,477
Cash flows from operating activities		(105,336,910)	(95,475,464)
Investing activities			
Purchase of property, plant and equipment		(2,202,467)	(5,655,249)
Proceeds from disposal of property, plant and equipment		1,000	50,395
Increase in short-term fixed deposit with maturity exceeding 3 months		(14,489,157)	(8,009,381)
Purchase of intangible assets		(7,190,790)	(1,312,818)
Cash flows from investing activities		(23,881,414)	(14,927,053)
Financing activities			
Proceeds from issue of shares		4,610,169	3,743,963
Government grants received		111,527,164	104,976,673
Other grants received		913,094	564,181
Cash flows from financing activities		117,050,427	109,284,817
Net decrease in cash and cash equivalents		(12,167,897)	(1,117,700)
Cash and cash equivalents at beginning of year		44,465,833	45,583,533
Cash and cash equivalents at end of year	6	32,297,936	44,465,833

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

Notes to the financial statements

These notes form an integral part of the financial statements.

The financial statements were authorised for issue by the Board Members on 5 June 2009.

1. Domicile and activities

Health Promotion Board (the “Board”) was established on 1 April 2001 under the provisions of the Health Promotion Board Act (Chapter 122B) (the “Act”) and is under the purview of the Ministry of Health. As a statutory board, the Board is subject to the directions of the Ministry of Health, and is required to implement policies and policy changes as determined by its supervisory ministry. The Board’s registered office is located at 3 Second Hospital Avenue, Singapore 168937.

The Board is also registered as a charity (Registration No: 01810) under the Charities Act (Chapter 37) since 17 September 2004.

The principal activities of the Board are to:

- (a) advise the Government, either of its own motion or upon request made to it by the Minister, on all matters connected with the promotion of good health and healthy lifestyles amongst the people of Singapore, including the formulation of policies, the creation of conditions and the provision of public facilities that are conducive to the promotion of good health and healthy lifestyle amongst the people of Singapore;
- (b) devise, organise and implement programmes and other activities for or related to the promotion of good health and healthy lifestyle amongst the people of Singapore, health education programmes and programmes and other activities for or related to the prevention or detection of diseases;
- (c) collaborate with any organisation to devise, organise and implement, or to provide support or assistance to any organisation in devising and implementing any of the programmes or activities referred to in paragraph 1(b);
- (d) monitor and conduct investigations and research into any matter relating to the health and nutritional statuses of the people of Singapore;
- (e) promote a healthy food supply in Singapore;
- (f) determine, establish and recommend nutritional standards and dietary guidelines, and guidelines for the provision of nutritional information;

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

- (g) provide healthcare services (including medical, dental, health-screening and immunisation services) to school children and such other persons or class of persons as the Board thinks fit;
- (h) provide consultancy services to Government departments, members of the healthcare industry and the private sector on matters relating to health education, the preservation and promotion of health, healthy lifestyles and healthy dietary practices and the prevention and detection of diseases; and
- (i) represent the Government internationally on matters related to or connected with health education, the preservation and promotion of health and the prevention and detection of diseases.

There have been no significant changes in the nature of these activities during the financial year.

2. Summary of significant accounting policies

2.1 Basis of preparation

The financial statements have been prepared in accordance with the provisions of the Act and Statutory Board Financial Reporting Standards ("SB-FRS"). SB-FRS include Statutory Board Financial Reporting Standards, Interpretations of SB-FRS and SB-FRS Guidance Notes as promulgated by the Accountant-General.

The financial statements have been prepared under the historical cost basis except certain financial assets and financial liabilities which are measured at fair value. Non-current assets are measured at the lower of carrying amount and fair value less costs to sell.

The financial statements are presented in Singapore dollars which is the Board’s functional currency.

The preparation of financial statements in conformity with SB-FRS requires management to make judgements, estimates and assumptions that affect the application of policies and reported amounts of assets, liabilities, income and expense. Actual results may differ from these estimates.

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 and in any future periods affected.

In particular, information about significant areas of estimation uncertainty and critical judgements in applying accounting policies that have the most significant effect on the amount recognised in the financial statements are described in note 12 – Obligations in respect of pension scheme.

The accounting policies set out below have been applied consistently by the Board to all periods presented in these financial statements.

2.2 Property, plant and equipment

Property, plant and equipment are stated at cost less accumulated depreciation and any impairment losses.

Cost includes expenditure that is directly attributable to the acquisition of the asset. The cost of self-constructed assets includes the cost of materials and direct labour, any other costs directly attributable to bringing the asset to a working condition for its intended use, and the cost of dismantling and removing the items and restoring the site on which they are located. Purchased software that is integral to the functionality of the related equipment is capitalised as part of that equipment.

The cost of replacing part of an item of property, plant and equipment is recognised in the carrying amount of the item if it is probable that the future economic benefits embodied within the part will flow to the Board and its cost can be measured reliably. The costs of the day-to-day servicing of property, plant and equipment are recognised in the income and expenditure statement as incurred.

The gain or loss arising on the disposal or retirement of an asset is determined as the difference between the sales proceeds and the carrying amount of the asset and is recognised in the income and expenditure statement.

Depreciation is recognised in the income statement on a straight-line basis over their estimated useful lives of an item of property, plant and equipment.

The estimated useful lives are as follows:

Computers	3 to 5 years
Leasehold improvement	8 years
Furniture and fittings	8 years
Medical equipment	8 years
Other equipment	3 to 10 years
Motor vehicles	10 years

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

Depreciation methods, useful lives and residual values of property, plant and equipment are reviewed, and adjusted as appropriate, at each reporting date.

2.3 Financial instruments

Non-derivative financial instruments

Non-derivative financial instruments comprise receivables, prepayments, cash and cash equivalents, payables and accruals.

Non-derivative financial instruments are recognised initially at fair value plus, for instruments not at fair value through profit and loss, any directly attributable transaction costs, except as described below. Subsequent to initial recognition, non-derivative financial instruments are measured as described below.

A financial instrument is recognised if the Board becomes a party to the contractual provisions of the instrument. Financial assets are derecognised if the Board's contractual rights to the cash flows from the financial assets expire or if the Board transfers the financial asset to another party without retaining control or transfers substantially all the risks and rewards of the asset. Regular way purchases and sales of financial assets are accounted for at trade date, i.e., the date that the Board commits itself to purchase or sell the asset. Financial liabilities are derecognised if the Board's obligations specified in the contract expire or are discharged or cancelled.

Cash and cash equivalents comprise cash at bank and on hand and fixed deposits. Fixed deposits with maturity exceeding 3 months are excluded from cash and cash equivalents in the cash flow statement.

Impairment of financial assets

A financial asset is assessed at each reporting date to determine whether there is any objective evidence that it is impaired. A financial asset is considered to be impaired if objective evidence indicates that one or more events have had a negative effect on the estimated future cash flows of that asset.

An impairment loss in respect of a financial asset measured at amortised cost is calculated as the difference between its carrying amount, and the present value of estimated cash flows discounted at the original effective interest rate.

All impairment losses are recognised in the income and expenditure statement. Impairment losses in respect of financial assets measured at amortised cost are reversed if subsequent increase in fair value can be related objectively to an event occurring after the impairment loss was recognised.

Share capital

Proceeds from issuance of shares are classified as equity.

2.4 Impairment – non-financial assets

The carrying amounts of the Board's non-financial assets are reviewed at each reporting date to determine whether there is any indication of impairment. If any such indication exists, the assets' recoverable amounts are estimated.

An impairment loss is recognised if the carrying amount of an asset or its cash-generating unit exceeds its estimated recoverable amount. A cash-generating unit is the smallest identifiable asset group that generates cash flows that largely are independent from other assets and groups. Impairment losses are recognised in the income and expenditure statement unless it reverses a previous revaluation, credited to equity, in which case it is charged to equity.

The recoverable amount of an asset or cash-generating unit is the greater of its value in use and its fair value less costs to sell. 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 or cash-generating unit.

Impairment losses recognised in prior periods are assessed at each reporting date for any indications that the loss has decreased or no longer exists. An impairment loss is reversed if there has been a change in the estimates used to determine the recoverable amount. An impairment loss is reversed only to the extent that the asset's carrying amount does not exceed the carrying amount that would have been determined, net of depreciation or amortisation, if no impairment loss had been recognised.

2.5 Intangible assets

Intangible assets that are acquired by the Board, which have finite useful lives, are measured at cost less accumulated amortisation and impairment losses. Intangible assets are amortised in the income and expenditure statement on a straight-line basis over their estimated useful lives of 3 to 5 years, from the date on which they are available for use.

2.6 Capital work-in-progress and computer software under development

Capital work-in-progress and computer software under development are stated at cost. Expenditure relating to the capital work-in-progress are capitalised when incurred. No depreciation is provided until the capital work-in-progress is completed and the related property, plant and equipment and intangible assets are ready for use.

2.7 Grants

Government grants and contributions received by the Board from other organisations for the purchase of depreciable assets are taken to grants received in advance account in the first instance. They are taken to the deferred capital grants account

upon the utilisation of the grants for the purchase of assets which are capitalised.

Deferred capital grants are recognised in the income and expenditure statement over the periods necessary to match the depreciation and write off of the assets purchased or donated, with the related grants. Upon the disposal of property, plant and equipment, the balance of the related deferred capital grants is recognised in the income and expenditure statement to match the net book value of the property, plant and equipment disposed.

Government and other grants received by the Board to meet operating expenses are recognised as income in the year these operating expenses were incurred and there is reasonable assurance that the Board will comply with the conditions attaching to it. Government grants are accounted for on the accrual basis.

Government grants are grants received from government bodies including statutory boards. Funds received from all other organisations are classified as non-government grants.

2.8 Leases

Where the Board has the use of assets under operating leases, payments made under the leases are recognised in the income and expenditure statement on a straight-line basis over the term of the lease. Lease incentives received are recognised in the income and expenditure statement as an integral part of the total lease payment made. Contingent rentals are charged to the income and expenditure statement in the accounting period in which they are incurred.

2.9 Employee benefits

Defined contribution plan

Obligations for contribution to defined contribution pension plans are recognised as an expense in the income and expenditure statement as incurred.

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.

Short-term benefits

Short-term benefit obligations are measured on an undiscounted basis and are expensed as the related service is provided.

A provision is recognised for the amount expected to be paid under short-term cash bonus if the Board has a present legal or constructive obligation to pay this amount as a result of past service provided by the employee and the obligation can be estimated reliably.

Post employment benefits

Cost of providing defined benefit retirement benefit scheme (the "HPB Pension Scheme") is determined using the projected unit credit method, with actuarial valuations being carried out at least once in three years. The present value of obligation for all pensionable employees is determined by projecting each active employee's benefits accrued from the starting date of their service with the Board (i.e., 1 April 2001) up to the valuation date, allowing for salary increases and the probability of earlier exits, and discounted using a long-term discount rate. The obligations to existing pensioners under the HPB Pension Scheme are calculated as the present value of pensions payable to the pensioners for their remaining lifetime.

At each valuation date, the total present value of obligation is compared to the book amount to determine the actuarial gain or loss. Any actuarial gain or loss which exceeds 10% of the present value of the plan obligations will then be amortised to the income and expenditure statement over the average expected remaining working lives of the pensionable employees.

Past service cost is recognised immediately to the extent that the benefits are already vested since the starting date of the pensionable employees' service with the Board.

2.10 Revenue recognition

Interest income

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

Service maintenance income

Service maintenance income is recognised when the service is rendered.

3. Property, plant and equipment

	Computers \$	Leasehold improvement \$	Furniture and fittings \$	Other equipment \$	Medical equipment \$	Motor vehicles \$	Capital work-in- progress \$	Total \$
Cost								
At 1 April 2007	8,283,866	7,222,701	512,498	1,957,420	10,384,920	377,490	34,610	28,773,505
Reclassification **	-	-	-	-	-	-	60,480	60,480
Additions	1,303,191	2,291,924	-	216,901	175,207	-	1,668,026	5,655,249
Disposals	(618,877)	-	(21,867)	(94,909)	(14,266)	-	(34,610)	(784,529)
At 31 March 2008	8,968,180	9,514,625	490,631	2,079,412	10,545,861	377,490	1,728,506	33,704,705
Additions	423,349	-	2,418	58,173	304,493	56,001	1,358,033	2,202,467
Transfers	262,348	185,029	-	1,120,681	-	-	(1,568,058)	-
Disposals	(481,792)	-	-	(47,456)	(49,186)	-	-	(578,434)
At 31 March 2009	9,172,085	9,699,654	493,049	3,210,810	10,801,168	433,491	1,518,481	35,328,738
Accumulated depreciation								
At 1 April 2007	7,004,133	3,643,067	442,081	1,362,807	6,860,362	359,640	-	19,672,090
Depreciation for the year	785,196	936,694	20,946	215,433	1,057,488	5,356	-	3,021,113
Disposals	(599,568)	-	(15,164)	(93,594)	(14,266)	-	-	(722,592)
At 31 March 2008	7,189,761	4,579,761	447,863	1,484,646	7,903,584	364,996	-	21,970,611
Depreciation for the year	918,324	1,223,505	17,860	268,392	1,044,882	5,821	-	3,478,784
Disposals	(479,462)	-	-	(47,456)	(45,373)	-	-	(572,291)
At 31 March 2009	7,628,623	5,803,266	465,723	1,705,582	8,903,093	370,817	-	24,877,104
Carrying amount								
At 1 April 2007	1,279,733	3,579,634	70,417	594,613	3,524,558	17,850	34,610	9,101,415
At 31 March 2008	1,778,419	4,934,864	42,768	594,766	2,642,277	12,494	1,728,506	11,734,094
At 31 March 2009	1,543,462	3,896,388	27,326	1,505,228	1,898,075	62,674	1,518,481	10,451,634

** Reclassification of Centralised IT Infrastructure from intangible assets to property, plant and equipment.

4. Intangible assets

	Computer software \$	Computer software under development \$	Total \$
Cost			
At 1 April 2007	20,127,866	405,528	20,533,394
Reclassification **	-	(60,480)	(60,480)
Additions	413,971	898,847	1,312,818
At 31 March 2008	20,541,837	1,243,895	21,785,732
Additions	3,905,624	3,285,166	7,190,790
At 31 March 2009	24,447,461	4,529,061	28,976,522
Accumulated amortisation			
At 1 April 2007	8,681,233	-	8,681,233
Amortisation charge for the year	3,141,608	-	3,141,608
At 31 March 2008	11,822,841	-	11,822,841
Amortisation charge for the year	3,131,233	-	3,131,233
At 31 March 2009	14,954,074	-	14,954,074
Carrying amount			
At 1 April 2007	11,446,633	405,528	11,852,161
At 31 March 2008	8,718,996	1,243,895	9,962,891
At 31 March 2009	9,493,387	4,529,061	14,022,448

** Reclassification of Centralised IT Infrastructure from intangible assets to property, plant and equipment.

5. Receivables

	2008/2009 \$	2007/2008 \$
Security deposit	256,720	291,275
Other receivables	47,904	262,245
	304,624	553,520

6. Cash and cash equivalents

Cash and cash equivalents in the cash flow statement consist of the following:

	2008/2009 \$	2007/2008 \$
Cash at bank and on hand	5,071,340	1,401,226
Fixed deposits	49,725,134	51,073,988
Cash and cash equivalents	54,796,474	52,475,214
Short-term fixed deposit with maturity exceeding 3 months	(22,498,538)	(8,009,381)
Cash and cash equivalents in the cash flow statement	32,297,936	44,465,833

The weighted average effective interest rates of fixed deposits at balance sheet date was 0.90% (2007/2008: 2.18%) per annum.

7. Share capital

	No. of shares	
	2008/2009	2007/2008
Issued and fully paid:		
At beginning of year	3,743,963	-
Issue of share capital	4,610,169	3,743,963
At end of year	8,354,132	3,743,963

During the year, the Board issued 4,610,169 shares to the Minister for Finance under Section 22A of the Health Promotion Board Act for total consideration of \$4,610,169 for cash to provide funds for the acquisition of property, plant and equipment and intangible assets.

The shareholder is entitled to receive dividends as declared from time to time.

Capital management

The Board defines "capital" as share capital and accumulated surplus. The Board's policy is to maintain a strong capital base to safeguard the ability to meet its long-term needs and to maintain creditor and market confidence.

There were no changes in the Board's capital management approach during the year. The Board is not subject to externally imposed capital requirements.

8. Accumulated surplus

The accumulated surplus would be used to fund scholarship and sponsorships for under-graduate and post-graduate studies to build capacity and to fund operational deficits when they arise.

9. Payables and accruals

	2008/2009	2007/2008
	\$	\$
Trade payables and accruals	22,274,272	22,736,977
Amount due to the Ministry of Health	175,589	178,183
Security deposits	491,375	486,230
	22,941,236	23,401,390

The contracted undiscounted cash outflows on other payables and accruals are expected to approximate their carrying amounts and settled within one year.

10. Grants receivables/(grants received in advance)

Grants receivables

The movement of grants receivables at the reporting date is as follows:

	2008/2009	2007/2008
	\$	\$
(a) Government		
At beginning of year	2,778,393	4,275,589
Receipts	(9,932,611)	(6,247,683)
Transfers to deferred capital grants	5,981	1,204,832
Transfers to income and expenditure statement	14,250,519	3,545,655
At end of year	7,102,282	2,778,393
(b) Non-government		
At beginning of year	31,074	-
Receipts	(140,509)	(178,000)
Transfers to income and expenditure statement	205,834	209,074
At end of year	96,399	31,074
Total grant receivable at end of the year	7,198,681	2,809,467

The Board's primary exposure to credit risk arises through its grants receivables. Concentration of credit risk relating to grants receivables is limited since mainly they are recoverable from Ministries and Government Agencies. There is no amount provided for collection losses.

Grants received in advance

The movement in grants received in advance during the year is as follows:

	2008/2009	2007/2008
	\$	\$
(c) Government		
At beginning of year	719,445	1,301,767
Grants received	101,594,553	98,728,989
Transfers to deferred capital grants	(4,110,934)	(2,024,866)
Transfers to income and expenditure statement	(95,725,460)	(97,286,445)
At end of year	2,477,604	719,445
(d) Non-government		
At beginning of year	101,598	103,588
Grants received	772,585	386,181
Transfers to income and expenditure statement	(189,885)	(388,171)
At end of year	684,298	101,598
Total grant received in advance at end of the year	3,161,902	821,043

Government operating grants

	Note	2008/2009	2007/2008
		\$	\$
Transferred from grants receivables	10(a)	14,250,519	3,545,655
Transferred from grants received in advance	10(c)	95,725,460	97,286,445
		109,975,979	100,832,100

Non-government operating grants

		2008/2009	2007/2008
		\$	\$
Transferred from grants receivables	10(b)	205,834	209,074
Transferred from grants received in advance	10(d)	189,885	388,171
		395,719	597,245

11. Deferred capital grants

	2008/2009 \$	2007/2008 \$
At beginning of year	17,981,628	20,953,576
Amount transferred from government grants	4,116,915	3,229,698
	22,098,543	24,183,274
Amount transferred to income and expenditure statement		
- to match depreciation funded by the government	(3,019,646)	(2,998,101)
- to match amortisation funded by the government	(3,031,784)	(3,141,608)
- to match net book value of assets disposed	(6,143)	(61,937)
	(6,057,573)	(6,201,646)
At end of year	16,040,970	17,981,628

12. Obligations in respect of pension scheme

The Board operates an unfunded defined retirement benefit plan for certain employees under the provisions of the Pension Act (Chapter 225, 2004 Revised Edition). The pension fund was set up by the Board on 1 April 2001.

The Board performed an actuarial valuation to determine the liability of the Board in respect of its defined retirement benefit plans. The amount of contribution is based on the actuarial valuation performed by Watson Wyatt Singapore Pte Ltd.

	2008/2009 \$	2007/2008 \$
Present value of unfunded obligations	10,667,000	8,965,960
Unrecognised actuarial (gains)/losses	(1,603,740)	406,954
	9,063,260	9,372,914

Movements in the net liability recognised in the balance sheet are as follows:

	2008/2009 \$	2007/2008 \$
At beginning of year	9,372,914	9,077,437
Amounts recognised in the income and expenditure statement	1,079,000	1,244,000
Benefits paid	(1,388,654)	(948,523)
At end of year	9,063,260	9,372,914

The amounts recognised in the income and expenditure statement are as follows:

	2008/2009 \$	2007/2008 \$
Current service costs	863,000	1,022,000
Interest on obligation	216,000	222,000
Total included in staff costs	1,079,000	1,244,000

Principal actuarial assumptions

Principal actuarial assumptions at the balance sheet date:

	2008/2009 %	2007/2008 %
Discount rate	2.00	3.00
Future salary increases	1.00	1.00

Assumptions regarding future mortality are based on published mortality tables. The expected retirement age is at 60 years old (2007/2008: 60 years old).

Source of estimation uncertainty

Pension expense is determined using certain actuarial estimates and assumptions relating to the discount rate used in valuing the defined benefit obligation and future expectations such as future salary increases, retirement age, and mortality rate of covered employees. These estimates and assumptions directly influence the amount recognised in the income and expenditure statements.

13. Key management personnel compensation

Key management personnel of the Board are those persons having the authority and responsibility for planning, directing and controlling the activities of the Board.

Key management personnel compensation is as follows:

	2008/2009 \$	2007/2008 \$
Salaries and other short-term employee benefits	1,775,166	2,111,123
Post employment benefits	135,705	179,884
	1,910,871	2,291,007

The remuneration of the top three key executives of the Board are disclosed in bands as follow:

	2008/2009	2007/2008
\$550,000 to \$600,000	-	1
\$500,000 to \$550,000	-	-
\$450,000 to \$500,000	-	-
\$400,000 to \$450,000	-	-
\$350,000 to \$400,000	1	2
\$300,000 to \$350,000	2	-
	3	3

14. Commitments

Capital commitments

Capital commitments approved but not provided for in the financial statements are as follows:

	2008/2009	2007/2008
	\$	\$
Commitments in respect of contracts placed as at balance sheet date	4,291,000	6,260,300

Lease commitments

Commitments in relation to non-cancellable operating leases contracted for at the reporting date but not recognised as liabilities, are payable as follows:

	2008/2009	2007/2008
	\$	\$
Payable:		
Within 1 year	43,000	2,973,000
After 1 year but within 5 years	76,000	119,000
	119,000	3,092,000

15. Related parties

With the adoption of SB-FRS by the Board during the financial year, the Board need not comply with the requirements of paragraphs 17 to 22 of SB-FRS 24 – “Related Party Disclosures” with respect to the disclosures of transactions and balances with parent Ministry and other state-controlled entities.

16. Financial risk management

Risk management is integral to the whole business of the Board. The Board has a system of controls in place to create an acceptable balance between the cost of risks occurring and the cost of managing the risks. The management continually monitors the Board’s risk management process to ensure that an appropriate balance between risk and control is achieved.

Liquidity risk

The Board has minimal exposure to liquidity risk as its operations are funded by government grants. The Board has ensured sufficient liquidity through the holding of highly liquid assets in the form of cash and cash equivalents at all times to meet its financial obligations.

Credit risk

The Board’s exposure to credit risk is minimal as its surplus cash is placed with financial institutions with good credit ratings.

The maximum exposure to credit risk is represented by the carrying amount of each financial asset in the balance sheet.

Market risk

Market risk is the risk that changes in market prices, such as interest rates and foreign exchange rates will affect the Board’s income or the value of its holdings of financial instruments. The objective of market risk management is to manage and control market risk exposures within acceptable parameters, while optimising the return on risk.

Interest rate risk

The Board is exposed to fair value interest rate risks mainly from investments in fixed deposits. Fair value interest rate risk is the risk that the fair value (price) of a financial instrument will fluctuate due to changes in market interest rates.

The carrying amounts and effective interest rates of fixed deposits by maturity are as follows:

	Effective interest rate per annum	Total	Fixed interest rate maturing		
	%	\$	less than 1 month	between 1 to 3 months	more than 3 months
			\$	\$	\$
2008/2009					
Fixed deposits	0.90	49,725,134	9,225,387	18,001,209	22,498,538
2007/2008					
Fixed deposits	2.18	51,073,988	9,675,138	33,389,469	8,009,381

Foreign currency risk

The Board’s exposure to foreign currency risk is minimal as it transacts mainly in Singapore dollars.

Estimation of the fair values

The notional amounts of financial assets and liabilities with a maturity of less than one year (including cash and cash equivalents, grants and other receivables, and other payables and accruals) are assumed to approximate their fair values.

17. New accounting standards not yet adopted

The Board has not applied the following accounting standards and interpretations that have been issued as of the balance sheet date but are not yet effective:

- SB-FRS 1 (revised 2008) *Presentation of Financial Statements*
- SB-FRS 23 (revised 2007) *Borrowing Costs*
- Amendments to SB-FRS 32 *Financial Instruments: Presentation* and SB-FRS 1 *Presentation of Financial Statements - Puttable Financial Instruments and Obligations Arising on Liquidation*
- Amendments to SB-FRS 39 *Financial Instruments: Recognition and Measurement – Eligible Hedged Items*
- Amendments to SB-FRS 101 *First-time Adoption of Financial Reporting Standards* and SB-FRS 27 *Consolidated and Separate Financial Statements – Cost of an Investment in a Subsidiary, Jointly Controlled Entity or Associate*

- Amendments to SB-FRS 102 *Share-based Payment – Vesting Conditions and Cancellations*
- SB-FRS 108 *Operating Segments*
- Improvements to SB-FRSs 2008
- INT SB-FRS 113 *Customer Loyalty Programmes*
- INT SB-FRS 116 *Hedges of a Net Investment in a Foreign Operation*
- INT SB-FRS 117 *Distributions of Non-cash Assets to Owners*

The Board is evaluating the initial application of the above standards and interpretations for the impact on the Board’s financial statements. The Board has not considered the impact of accounting standards issued after the balance sheet date.

18. Comparative information

The comparative figures relating to the financial statements for the year ended 31 March 2008 were audited by another firm of Certified Public Accountants.

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QUITLINE

Monday - Friday: 8.30 - 5.00pm
Saturday: 8.30am - 1.00pm
Tel: 1800 438 2000

HEALTH INFORMATION CENTRE

Level 3, Health Promotion Board
Monday - Friday: 8.30am - 5.00pm
Saturday: 8.30am - 1.00pm
Closed on Sundays and Public Holidays
Tel: 6435 3954
Fax: 6536 1277

HEALTHZONE

Level 2, Health Promotion Board
Monday: 1.00pm - 5.00pm
Tuesday - Friday: 9.00am - 5.00pm
Saturday: 9.00am - 5.00pm
Closed on Sundays and Public Holidays
Tel: 1800 435 3616
Fax: 6538 7725



Health Promotion Board
3 Second Hospital Avenue,
Singapore 168937

Tel: 6435 3500
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