

Common questions about Palliative Care

My loved one has a serious illness. When should he/she be referred to a home palliative care programme?

When the condition of your loved one continues to deteriorate, resulting in troubling symptoms or anxieties despite the best care by expert doctors, palliative care may be an option.

Palliative care adds another layer of care to control symptoms and provide emotional support. Discuss with your loved one's primary doctor and enquire if your loved one will benefit from a home palliative care programme at this stage.

If palliative care is involved, does this mean treatment will no longer be provided for my loved one?

On the contrary, a thorough holistic review of your loved one's treatment will be done. Possible treatment options that can make a difference at this stage of your loved one's condition will be discussed and provided.

My loved one is being referred to palliative care. Does this mean he/she is near the end of life?

Your loved one is suffering from a serious illness and is at risk of passing on. Though we may not necessarily know how long he/she has at this stage, let us focus instead on providing him/her with a good quality of life while ensuring he/she is cared for in a comfortable, dignified manner.

CONTACT

For enquiries or more information, please contact the Violet Programme Team.

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VIOLET
PROGRAMME

Home Palliative Care



ST. ANDREW'S
COMMUNITY HOSPITAL



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Violet PROGRAMME

Palliative Care

or hospice care is care that focuses on maximising quality of life within the confines of a serious illness.

What does Palliative Care have to offer?

Symptom
management

Support from
multiple disciplines
to meet the needs of
your loved one

Coordination
of care that is
according to
your loved one's
preference

Education and
emotional support
to empower you in
providing care for
your loved one



The Violet Programme is a collaboration between St. Andrew's Community Hospital and Changi General Hospital. It is a home palliative care programme, specifically for patients with non-cancer diagnoses (e.g. advanced dementia, kidney failure, heart failure).

AIMS OF THE PROGRAMME

- To provide 24 hours a day, 7 days a week medical coverage
- To customise care according to what is important to your loved one
- To coordinate care with the primary doctor in the general hospital and other community providers involved in your loved one's care
- To manage symptoms at home and prevent frequent, unnecessary readmissions to the hospital
- To train the caregiver on how to care for your loved one at home
- To provide psychological and emotional support to the caregiver and family

OUR TEAM COMPRISES

- Doctors
- Nurses
- Medical social workers
- Pastoral care staff
- Volunteers

and other allied health professionals according to the needs of your loved one.