



FOR IMMEDIATE RELEASE

New S\$6.59 Million Stroke Rehab Ecosystem Set to Strengthen Post-Stroke Care with Shorter Wait Times between Hospital Discharge and Community Rehabilitation and Provide Enhanced Wellness Support for Stroke Survivors

Led by the Lien Foundation, Singapore General Hospital and Tan Tock Seng Hospital, the initiative trials an integrated stroke rehab ecosystem that delivers timely, tailored care through hospital-community coordination and upskilling community therapists.

Singapore, 26 August 2025 – A four-year initiative titled **Stroke Rehab Ecosystem** began its roll out in August 2025. It was designed to strengthen the continuum of care post-stroke and is set to reduce the wait time between hospital discharge and community rehabilitation from several months to two weeks post-discharge. It will also introduce mental health initiatives as well as a post-rehabilitation wellness support programme. More than 2,000 stroke survivors are expected to benefit from the initiative.

Philanthropic organisation Lien Foundation is committing \$5.09 million to the initiative over four years. Singapore General Hospital (SGH), Tan Tock Seng Hospital (TTSH), as well as community partners including AWWA, NTUC Health, Stroke Support Station (S3), St Luke's ElderCare (SLEC), and SPD will collaborate and co-develop structured care pathways, more robust and personalised rehabilitation approaches, and standardised clinical guidelines to improve stroke survivors' rehabilitation outcomes.

Lien Foundation is committing another S\$1.5 million to start Singapore's first adaptive gym which will be established and operated by S3. The gym is designed specifically as a safe place for stroke survivors to further their recovery, maintain and improve physical abilities, as well as to enhance their overall quality of life after their day rehabilitation journey.

As part of this project, an integrated mobile digital application will be developed by TTSH, SGH, and community partners, to further support stroke survivors beyond formal rehabilitation.

Key Statistics on Stroke and Rehabilitation

In Singapore, there are approximately 10,000 stroke incidents recorded annually. One in four individuals is expected to experience a stroke during their lifetime and accounts for the third highest cause of disease burden¹. Among stroke survivors, only 1 in 3 achieves partial recovery, with the most significant progress typically occurring within the first 3 to 6 months post-stroke.² Without timely and adequate rehabilitation, 1 in 5 stroke survivors may experience deterioration in mobility that will subsequently impact their ability to perform daily

¹ <https://www.healthxchange.sg/how-to-prevent/stroke/four-fast-facts-about-stroke>

² <https://pmc.ncbi.nlm.nih.gov/articles/PMC4415968/>

activities³. In 2021, out of a sample cohort of 1,235 stroke survivors, 24% were rehospitalised due to a combination of medical, functional, and demographic risk factors, particularly in the first year following discharge.⁴

Up to 60% of stroke survivors have some degree of cognitive impairment at one year post-stroke onset⁵ and 30% have post-stroke depression (PSD)⁶. PSD is a major factor that limits participation in rehabilitation and therefore adversely impacts the extent of stroke recovery. It is also associated with increased hospitalisation cost, increased risk of mortality, and stroke recurrence.

The recommended rehabilitation schedule of two sessions per week during the first three months post-discharge is often unmet - only about 30% - 40% of stroke survivors referred to community rehab take up the service. This is due to factors such as poor coordination, limited understanding of rehabilitation benefits, and transportation challenges.

**For additional statistics please see Factsheet point 4.*

Strengthening post-stroke care via the Stroke Rehab Ecosystem

To tackle the complexity of post-stroke care, the Stroke Rehab Ecosystem seeks to complement and build on existing post-stroke care programmes with three core goals: shortening wait time to rehabilitation and increasing stroke survivor uptake of rehabilitation, training and upskilling of community therapists, and enhancing wellness support for stroke survivors post-rehabilitation.

Shorten wait time to rehabilitation and increase uptake of rehabilitation services

The introduction of direct referral pathways from hospital to community services as well as a bridging service will ensure continuity of post-stroke care. In this system, stroke survivors will be screened in the hospital and categorised by their stroke severity into three tiers then offered support based on required rehabilitation and psychological needs:

- Tier 1 (~40% of stroke survivors): For survivors with mild stroke severity, post-discharge services will be wellness-focused
- Tier 2 (~40% of stroke survivors): Survivors with high rehab potential will go through active rehab at DRC to improve function.
- Tier 3 (~20% of stroke survivors): For those with highest stroke severity and therefore limited rehab potential, SRE's focus would be on caregiver support and managing care burden of survivors.

**For more detailed information please see Factsheet point 2.*

³ <https://www.tandfonline.com/doi/full/10.1080/10749357.2023.2194095>

⁴ <https://pmc.ncbi.nlm.nih.gov/articles/PMC8814857/>

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[https://www.ahajournals.org/doi/10.1161/STR.0000000000000430#:~:text=Post%2Dstroke%20cognitive%20impairment%20\(PSCI,more%20frequent%20than%20complete%20recovery.](https://www.ahajournals.org/doi/10.1161/STR.0000000000000430#:~:text=Post%2Dstroke%20cognitive%20impairment%20(PSCI,more%20frequent%20than%20complete%20recovery.)

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https://cfps.org.sg/publications/the-singapore-family-physician/article/2042_pdf#:~:text=INTRODUCTION,chronic%20diseases%20of%20stroke%20survivors.

To reduce wait time for rehabilitation from several months to one to two weeks post-discharge, AWWA will provide home therapy services as a bridging service for stroke survivors in Tiers 2 and 3, while they await enrollment into a Day Rehab Centre (DRC). Suitable service users in Tier 2 will also be offered concurrent home therapy services even after enrollment into a DRC which will include Community Reintegration services.

In addition, to minimise challenges faced by stroke survivors as they transition from acute to community care, dedicated coordinators at SGH and TTSH will be introduced to proactively manage their rehabilitation journey during the first year of stroke recovery. The coordinators will support their needs, monitor progress, identify any challenges and escalate issues back to hospital if a need arises. Proactive case management is expected to improve survivors' adherence to at least two to three rehabilitation sessions per week for the first six months' — also dubbed the 'golden window' post-discharge. Thereafter, survivors will receive weekly guided support for up to a year post stroke.

Training and upskilling of community therapists

To ensure consistency and effectiveness of rehabilitation programmes post-discharge, doctors, therapists and nurses at SGH and TTSH will work with community partners to co-develop and refine community programmes to meet the targeted rehab intensity as well as mental health needs of stroke survivors.

Structured and regular engagements with a multidisciplinary hospital team (MDT) made up of rehabilitation physicians, neurologists, physiotherapists, occupational therapists, psychologists and psychiatrists will be set up. The MDT will provide tailored training to community therapists and support for complex cases, including managing mental health issues, with a focus on early assessment, intervention of psychological and neuropsychiatric symptoms. This includes providing targeted guidance for complex cases, such as managing mental health issues, by identifying high-risk individuals and delivering appropriate interventions within the community to ensure more effective and comprehensive rehabilitation.

Enhancing wellness support for stroke survivors post-rehabilitation

The third goal of the programme is designed to strengthen wellness support for stroke survivors after the rehabilitation phase. Community partner S3 will establish Singapore's first ever stroke-focused adaptive gym at Ang Mo Kio Hub. This gym will feature tailored resources, advanced rehab equipment, universal design, survivor peer support initiatives and an integrated rehab component managed by professional therapists. S3's proposal to build an adaptive gym aligned with what Lien Foundation had started with Gym Tonic. The adaptive gym aims to serve as a critical link in the continuum of post-stroke care, extending support and recovery beyond rehabilitation.

The adaptive gym will be staffed by exercise trainers who will receive specialised training to competently support the unique needs of stroke survivors with customised training routines. The gym offers a seamless transition for stroke survivors moving from post-discharge rehabilitation to community-based active lifestyle support, promoting long-term physical

health, reducing the risks of recurrent strokes, and thereby enhancing quality of life. Most importantly, it seeks to reframe survivors' mindsets, from one of a patient in recovery to an athlete in training.

Assessing success

It is hoped that through the coordinated effort by two of the leading hospitals in stroke recovery and Singapore's key community rehabilitation partners, the Stroke Rehab Ecosystem will offer stroke survivors a more robust, holistic and sustainable path to stroke recovery. Key markers of success would include, uptick in survivors' adherence to rehabilitation, improvements in stroke survivors' functional mobility and mental health outcomes, as well as survivors' continued motivation to pursue progress post-rehabilitation.

For press enquiries, please contact:

Sabrina Chan

sabrina@whitelabelpr.com.sg
+65 9818 5456

Siobhan Tan

siobhan@whitelabelpr.com.sg
+65 8188 2658

Freda Yuin

publicrelations@lienfoundation.org
+65 90020321

About Lien Foundation

The Lien Foundation is a Singapore philanthropic house noted for its model of radical philanthropy. It breaks new ground by investing in innovative models of care, convening strategic partnerships and catalysing action at the intersection of health and social care. The Foundation's focus areas include palliative care, aged care, and child & maternal health. For more information, visit www.lienfoundation.org.

About Singapore General Hospital

Singapore General Hospital, established in 1821, is the largest tertiary hospital in Singapore and ranked among the world's best. It provides the most comprehensive patient-centred care with over 50 clinical specialties on its campus. As an Academic Medical Centre, it takes pride in training healthcare professionals and conducting cutting edge research to meet evolving needs of the nation as well as the region. Driven by a strong sense of purpose, SGH is committed to give of its best to heal and bring hope, as it has for over 200 years.

For more information, please visit www.sgh.com.sg

About Tan Tock Seng Hospital

Tan Tock Seng Hospital (TTSH) is the flagship hospital of the National Healthcare Group, Singapore. As a pioneering hospital with strong roots in the community for 181 years, TTSH is recognised as the People's Hospital, serving residents living in Central Singapore.

As one of the largest multidisciplinary hospitals in Singapore, TTSH operates more than 2,000 beds with centres of excellence including the National Centre for Infectious Diseases (NCID), Institute for Geriatrics & Active Ageing (IGA), NHG Eye Institute (NHGEI) and TTSH Rehabilitation Centre. The 600-bed TTSH Integrated Care Hub was set up to advance recovery and rehabilitative care.

About AWWA

AWWA was founded in 1970 by a group of volunteers supporting low-income families and has since evolved into one of Singapore's largest multi-service social service agencies. AWWA's multi-professional team supports the integration and inclusion of children with developmental needs, families with complex social issues, the elderly, and persons with additional needs so that

they may live out their various dreams and aspirations. AWWA is a registered charity with an Institution of a Public Character status.

About NTUC Health Co-operative Limited

NTUC Health Co-operative Limited (NTUC Health) is an NTUC enterprise that provides a comprehensive and integrated suite of quality and affordable health and eldercare services to meet the growing needs of families and their dependents. Building on close to three decades of experience and expertise, NTUC Health is among the largest providers of active ageing, senior day care, nursing home, and home personal care services in Singapore. We also serve vulnerable seniors in selected areas in Singapore through Community Case Management Services (CCMS), CREST mental health support, and a sheltered senior group home. In addition, we run a family medicine clinic.

Our purpose is to achieve 'health for life'; enabling healthy and fulfilling years by being a trusted partner of seniors and their families in our community.

For more information, please visit ntuchealth.sg or follow us on Facebook, Instagram, and LinkedIn.

About Stroke Support Station (S3)

Founded in 2015, Stroke Support Station (S3) is Singapore's first and only community-based agency focused solely on stroke recovery and wellness. S3 supports survivors and caregivers after hospital discharge with a unique blend of technology-enabled therapy, conventional therapy, and its signature S3 Wellness Programmes—designed to enhance cognitive, emotional, and physical wellbeing.

Beyond recovery, S3 promotes stroke prevention and active ageing through outreach, volunteer engagement, and community initiatives under its Active Ageing Centre (AAC). S3 is also home to an Innovation Lab that drives co-created solutions to improve the quality of life for stroke survivors, through collaboration with social innovators, clinicians, and caregivers. S3 will also be launching Singapore's first stroke-focused Adaptive Gym in Q1 of 2026.

About St Luke's ElderCare

St Luke's ElderCare (SLEC) is a Christian healthcare provider dedicated to enriching the lives of seniors in Singapore, regardless of race, language and religion. Guided by our GRACE philosophy of care, we are committed to providing compassionate and holistic care that fosters autonomy and choice.

To empower seniors of varying needs, from the fit to the frail, we offer a comprehensive suite of services islandwide. These include community-based programmes that promote active ageing; centre-based offerings such as day care, rehabilitation and nursing; residential (nursing home) services for long-term care; and home-based services covering medical, nursing and therapy needs.

Leveraging our legacy of over 25 years, we are on an unstoppable mission to transform the care challenges of Singapore's ageing population. Through innovation, collaboration and education, we seek to elevate the community care sector, where seniors thrive in their golden years and age with dignity, independence and joy.

Incorporated in 1999, SLEC is a registered charity and an Institution of a Public Character.

Find out more at www.slec.org.sg or follow us on [Facebook](#), [Instagram](#) and [LinkedIn](#).

About SPD

Established in 1964, SPD is a Singapore charity dedicated to enabling people with disabilities, as well as those who may develop disabling conditions, to live independently and participate fully in society. Originally founded to serve people with physical disabilities, SPD has since grown to provide a wide range of services, including early intervention, day care, senior care, day rehabilitation, assistive technology, employment and educational support, community activities and lifelong learning, case management and caregiver support. Through these efforts, SPD supports people of all ages with different disabilities to thrive in school, at work and in daily life within mainstream society.

For more information, please visit www.spd.org.sg.

STROKE REHAB ECOSYSTEM FACTSHEET

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1. About Stroke Rehab Ecosystem

Programme Name	Stroke Rehab Ecosystem
Programme Duration	August 2025 – August 2029 (4 years)
Project Support	Lien Foundation is funding a total of \$6.59 million of which \$1.5 million is committed to the establishment of an adaptive gym.
Partners	<ul style="list-style-type: none"> • Lien Foundation • Singapore General Hospital (SGH) • Tan Tock Seng Hospital (TTSH) • AWWA • NTUC Health • Stroke Support Station (S3) • St Luke's ElderCare (SLEC) • SPD <p>AWWA is a strategic partner to set up Tier 1 to Tier 3 services in the central catchment. Its home therapy plays a key bridging role in supporting stroke survivors post-discharge, where needed. As one of Singapore's largest therapy hubs, AWWA also extends its services to support other centres in the community.</p> <p>NTUC Health's partnership with SGH will focus on bridging home therapy programmes for stroke clients. The programme aims to provide timely rehabilitation within the comfort of client's homes while they await admission to day rehab centres.</p> <p>Under this programme, NTUC Health will work closely with clients to personalise rehabilitation interventions that optimise recovery and restore independence. This includes home visits by Physiotherapists, Occupational Therapists, or Speech Therapists to assess rehabilitation needs, prescribe exercises for everyday tasks like bathing and feeding, and recommendations on modifications for a safer home environment. NTUC Health will also provide caregiver training to equip them with the necessary</p>

	<p>skills to support their loved ones in daily activities and home exercises.</p> <p>Additionally, NTUC Health can facilitate referrals to its home personal care services under the same flagship, providing additional caregiving support to help ease the burden on caregivers.</p> <p>NTUC Health offers home therapy services islandwide and operates 16 rehab and physiotherapy centres covering SingHealth and NHG regions. Senior gyms and active ageing services are also available to support clients through their post-rehabilitation journey.</p> <p>Stroke Support Station is a community partner specialising in stroke rehabilitation and wellness programmes, operating two Day Rehabilitation Centres, an Active Ageing Centre and Innovation Lab. It will also manage Singapore's first Adaptive Gym at Ang Mo Kio Hub.</p> <p>SLEC offers accessibility with 12 centres in the central region (managed by NHG) and 9 in the eastern region (managed by SingHealth), and will be able to take in referrals from the hospitals respectively. In these two regions, it has two centres equipped with advanced robotics therapy. It also provides home therapy services island-wide.</p> <p>As part of the Stroke Rehab Ecosystem collaboration, SLEC and TTSH have partnered to develop a Mobility Function Training programme to improve care delivery for stroke rehabilitation in the community.</p> <p>SPD's rehabilitation and senior care programmes support stroke survivors holistically in the community — helping them regain physical function, rebuild confidence, and reintegrate into daily life, including returning to work. Our centres are located across both SingHealth and NHG Health clusters, ensuring accessible, community-based care. Through therapy and vocational support, we empower stroke survivors to recover with dignity and resume participation in mainstream society.</p>
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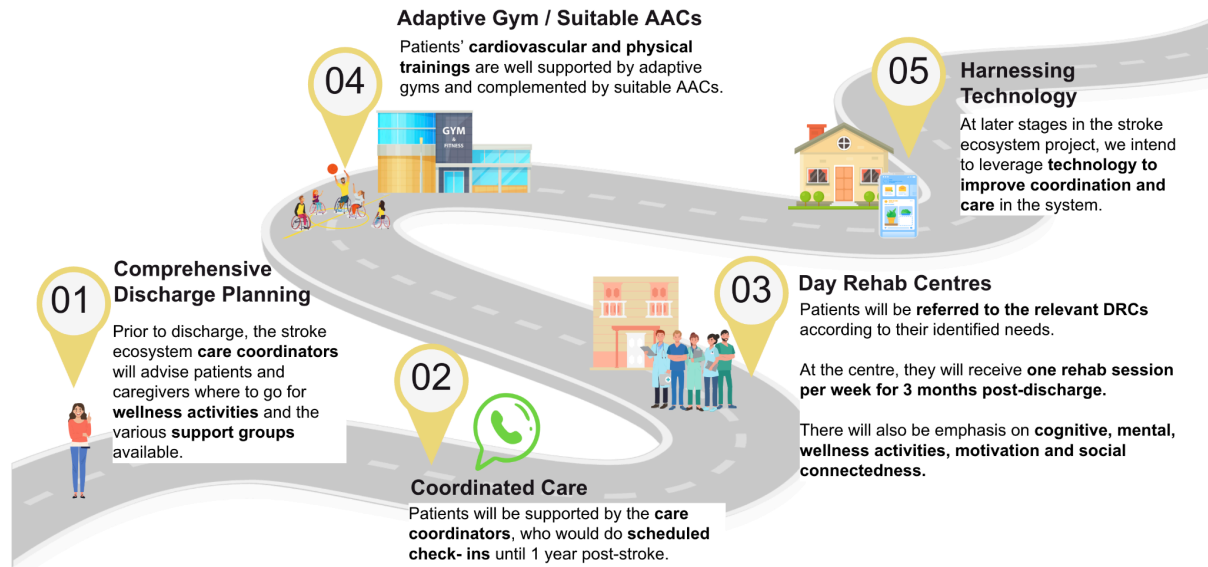
2. Comparison of Stroke Survivor Journey

The Stroke Rehab Ecosystem initiative takes a proactive approach, aligned with the MOH One Rehabilitation Framework.

2.1. Tier 1 Mild, Stroke Survivors with pure motor impairment ~40%

Current model: Stroke survivors discharged directly home, receive no referrals to community wellness programmes, and are largely left to seek support and rehabilitation activities on their own.

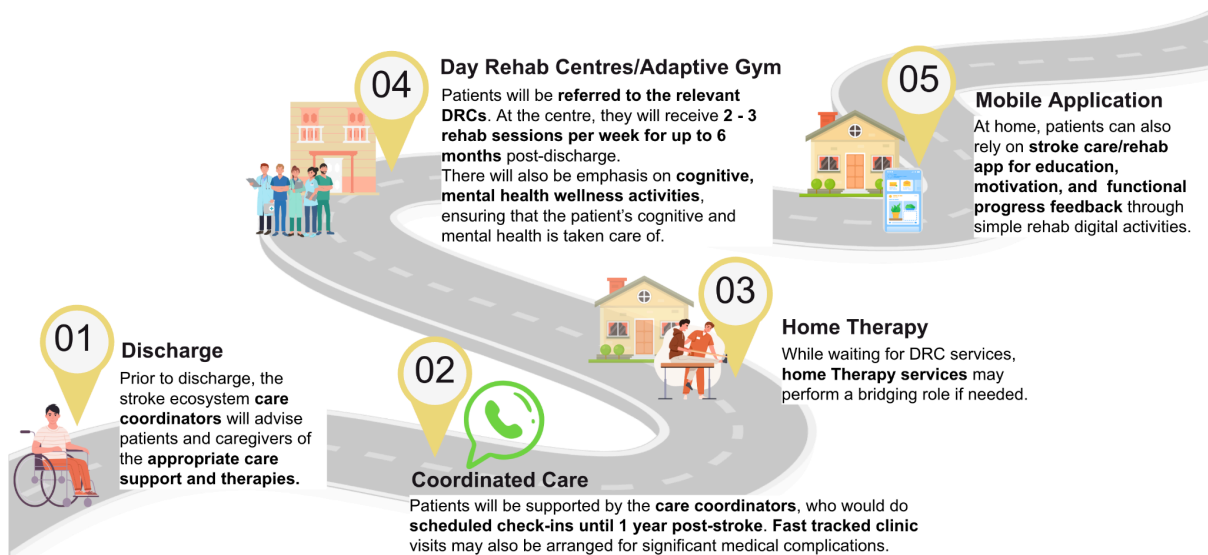
Tier 1 Stroke Rehab Ecosystem model:



2.2. Tier 2 High Rehab Potential, Stroke survivors with cognitive / sensory / communication impairment ~40%

Current model: Referrals to Day Rehab Centres (DRC) are mainly made through the Agency for Integrated Care (AIC) portal and this group of stroke survivors often face long wait times. Take up rate is around 30% as there is often no follow-up to ensure that they begin or continue rehabilitation in the community.

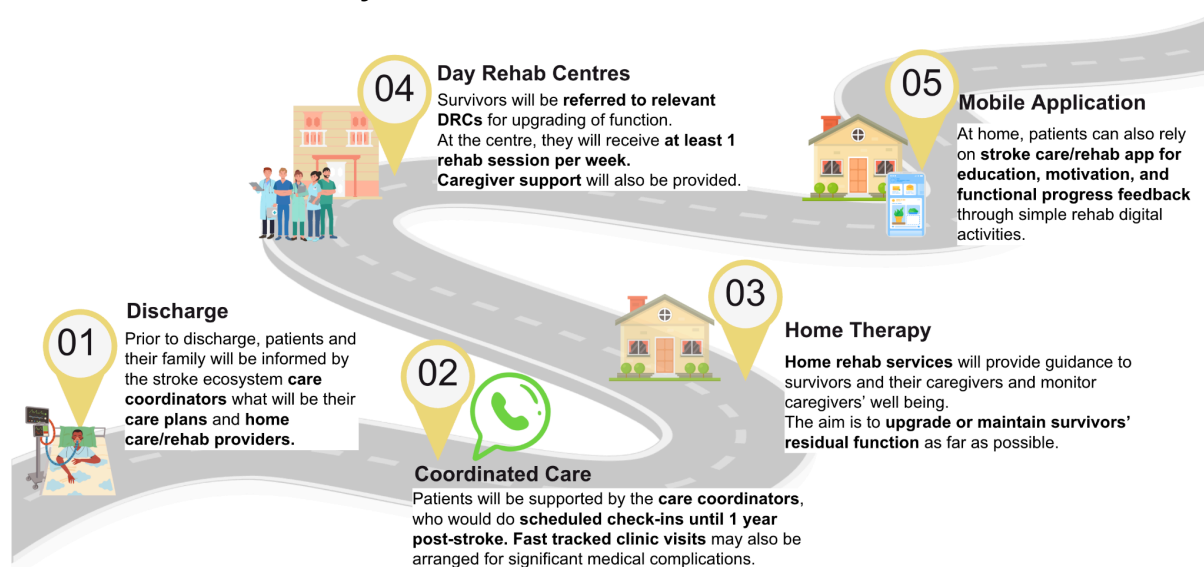
Tier 2 Stroke Rehab Ecosystem model:



2.3. Tier 3 Severe With Limited Rehab Potential, Stroke survivors with severe motor and cognitive / perceptual (including sensory) / communication impairment ~20%

Current model: No referrals are made for this group of stroke survivors and they are only followed up several months later during their next hospital visit.

Tier 3 Stroke Rehab Ecosystem model:



**Not all AACs are equipped to take in stroke patients - even though they are discharged from rehabilitation programmes, they typically do not meet AACs' entry criteria of being physically independent. AWWA will deploy therapists to develop and enhance the current AAC activities at its Kampung AWWA as well as upskill AAC staff to support stroke patients as part of community reintegration, for e.g. safety considerations of training stroke survivors, post-stroke self-management skills, fall prevention education.*

3. Quotes by Spokespersons

"To suffer a stroke is to endure a profound and often devastating loss, not just of physical ability, but of independence, identity, and confidence. Rehabilitation is crucial for restoring function and quality of life for survivors but many never receive the intensive and sustained therapy they require. This coalition creates a more coordinated pathway from hospital care to community-based rehabilitation and beyond. Together, we can better support survivors to reclaim their strength, restore their dignity, and rediscover what's possible. Because the real measure of success isn't just survival, it's the ability to truly live again."

— Mr Lee Poh Wah, CEO, Lien Foundation

"Our Stroke Rehab Ecosystem recognises that every stroke survivor's journey is unique and it is not a 'one-care-fits-all' approach. Through this initiative, together with our partners in the community, our clinicians at Tan Tock Seng Hospital will be enhancing mental health support while addressing rehabilitation paths to meet each patient's recovery needs – ensuring a holistic approach to recovery and that no patient or caregiver gets left behind."

— Adjunct Associate Professor Loh Yong Joo,
Overall Project Lead (TTSH)

Senior consultant and Head of Department in TTSH Department of Rehabilitation

Medicine

"Based on feedback from our stroke patients, the Stroke Ecosystem interventions will facilitate both a smooth, timely transition to post-discharge rehabilitation and enable earlier identification and management of complications."

— Dr Geoffrey S Samuel,
Overall Project Lead (SGH)

Senior Consultant and Head of Department in SGH Department of Rehabilitation
Medicine

"At AWWA, holistic care means journeying with our clients, from hospital discharge to reintegration into the community. As one of Singapore's largest therapy hubs, our therapists deliver timely, person-centred care that strengthens the continuum of care and restores independence. Our Home Therapy Service, which supports clients islandwide, will provide bridging services and community-based rehabilitation in this project to support stroke survivors - particularly those with moderate to severe impairments, to continue their recovery while awaiting Day Rehab enrolment. This aligns with our mission to enable fulfilling lives by empowering our clients to participate meaningfully in society."

— Mr J R Karthikeyan, CEO, AWWA

"We see ourselves as a bridge for stroke survivors — supporting them as they move from structured rehabilitation into fuller participation in community life. But what if recovery didn't end there? What if fitness itself became the next aspiration, where survivors pursue strength, mobility and confidence as goals in their own right? S3's adaptive gym equips survivors with adaptive fitness facilities and professional guidance in a safe and supportive environment. It aims to help them build strength, regain independence, and grow in confidence. More than a gym, it is a community where survivors can continue their recovery and draw encouragement from one another."

— Ms Ng Rei Na, Executive Director, S3

4. Additional Statistics on Stroke in Singapore

Prevalence of Stroke in Singapore

Data gathered between the years 2011 - 2021 showed less than half (46%) of stroke survivors in Singapore returned to work. The incidence of stroke among those within the active workforce, ages between 30 - 59, had risen by about 20% during this period¹. This contributes to the indirect and direct economic burden of stroke which is estimated to total \$5.42 billion².

Without timely and adequate rehabilitation, one in five survivors may experience deterioration in mobility that impacts their ability to perform daily activities³. Some of these mobility issues may also cause other avoidable readmissions such as fractures caused by falls, or in some cases, urinary issues due to survivors' inability to access toilets the way they are used to. This underscores the need to optimise post-stroke rehabilitation.

Additionally, the risk of stroke survivors experiencing another stroke is four times higher than the general population.⁴ The risk of a recurrent stroke in 5 years is estimated at 15%.

Psychological and Social Impact of Stroke

Apart from affecting their physical abilities, stroke also has an impact on their psychological and social aspects.

Clinical observations have also identified links between ischemic or haemorrhagic stroke, stroke lesion locations, symptom profiles and PSD. These factors are important to consider when formulating pharmacological and non-pharmacological treatments for PSD in different clinical contexts⁵. However, interventions to address cognitive impairment, depression and psychosocial needs are missing from underdeveloped care models.

Exercise and its benefits for stroke survivors

Regular, consistent exercise is essential in reducing the risk of recurrent strokes and engaging in high-intensity aerobic exercise has been shown to promote greater brain recovery, supporting improved functional outcomes⁶. However, one study found that stroke survivors in Singapore walk an average of only 5,382 steps a day, less than the recommended 6,500 to 8,500 steps a day for people with mobility challenges.⁷

Sources and Citations

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⁷<https://www.sgh.com.sg/news/patient-care/reasons-for-stroke-survivors-inactivity-is-more-than-just-lack-of-motivation-study-finds#:~:text=3.,survivors%20from%20being%20physically%20active>

5. Glossary of Terms in Chinese

Organisation	
Lien Foundation	连氏基金
Tan Tock Seng Hospital (TTSH)	陈笃生医院
Singapore General Hospital (SGH)	新加坡中央医院
Day Rehab Centres	日间康复中心
AWWA	AWWA
NTUC Health	职总保健合作社
Stroke Support Station (S3)	中风援助中心

St Luke's ElderCare (SLEC)		圣路加乐龄关怀
SPD		SPD
Spokespersons		
Lien Foundation	Mr Lee Poh Wah Chief Executive Officer	李宝华 连氏基金 总裁
Tan Tock Seng Hospital	Adjunct Associate Professor Loh Yong Joo Senior Consultant and Head, Department of Rehabilitation Medicine	兼任副教授 罗荣裕 主任 康复医学科 康复医学科 陈笃生医院
Singapore General Hospital	Dr Geoffrey S Samuel Head and Senior Consultant, Rehab Medicine	杰弗里 塞缪尔医生 主任兼高级顾问 康复医学
AWWA	Mr Sean Tan Director, Health & Senior Care	郑有松 总监, 乐龄保健服务
Stroke Support Station (S3)	Ng Rei Na Executive Director	黄玲娜 执行董事
St Luke's ElderCare	Caleb Low Acting Head Of Physiotherapy	刘伟杰 物理治疗部门代主管
SPD	Ron Loh Assistant Chief Executive Officer (Services)	卢荣义 SPD助理总裁 (服务)
NTUC Health	Irene Toh Head of Allied Health, NTUC Health	卓爱玲 综合医疗保健总监

Other Terminology		
	Adaptive gym	适应性健身中心
	Care Coordinators	护理协调员
	Cardiac rehabilitation	心脏康复
	Community partners	社区合作伙伴
	Community therapists	社区治疗师
	Community rehabilitation	社区康复
	Early intervention	早期介入
	Long-term rehabilitation	长期康复
	Post-rehabilitation	康复后期
	Referral system	转介系统
	Rehabilitation	康复训练
	Stroke	中风
	Stroke recovery	中风后康复
	Stroke survivors	中风幸存者
	Take-up rate	接受率
	Upskilling	技能提升

6. About the Organisations

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About St Luke's ElderCare

St Luke's ElderCare (SLEC) is a Christian healthcare provider dedicated to enriching the lives of seniors in Singapore, regardless of race, language and religion. Guided by our GRACE philosophy of care, we are committed to providing compassionate and holistic care that fosters autonomy and choice.

To empower seniors of varying needs, from the fit to the frail, we offer a comprehensive suite of services islandwide. These include community-based programmes that promote active ageing; centre-based offerings such as day care, rehabilitation and nursing; residential (nursing home) services for long-term care; and home-based services covering medical, nursing and therapy needs.

Leveraging our legacy of over 25 years, we are on an unstoppable mission to transform the care challenges of Singapore's ageing population. Through innovation, collaboration and education, we seek to elevate the community care sector, where seniors thrive in their golden years and age with dignity, independence and joy.

Incorporated in 1999, SLEC is a registered charity and an Institution of a Public Character.

Find out more at www.slec.org.sg or follow us on [Facebook](#), [Instagram](#) and [LinkedIn](#).

About SPD

Established in 1964, SPD is a Singapore charity dedicated to enabling people with disabilities, as well as those who may develop disabling conditions, to live independently and participate fully in society. Originally founded to serve people with physical disabilities, SPD has since grown to provide a wide range of services, including early intervention, day care, senior care, day rehabilitation, assistive technology, employment and educational support, community activities and lifelong learning, case management and caregiver support. Through these efforts, SPD supports people of all ages with different disabilities to thrive in school, at work and in daily life within mainstream society.

For more information, please visit www.spd.org.sg.