



**ANNUAL REPORT
FOR
FINANCIAL YEAR ENDING 31st DECEMBER
2022**

Social Health Growth Ltd

社会健康成长学会



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About Us

Our logo depicts a child in her mother's embrace. Shaped like a heart, the logo represents our dedication to helping the underprivileged families. The letters, S, H and G represent Social, Health, and Growth respectively. The vines and flowers extending from the G expresses the organization's strength to reach beyond our values and capacity. The three flower buds signify us exercising our values through our minds, hearts and physical actions:

Commitment, Teamwork and Cooperation, Improvement, Trust & Care

OUR VISION

To support parents and disadvantaged families raise healthy children into contributing members of society.

OUR MISSION

SOCIAL

To understand social inclusion and emphasize the significance of social belongingness. Our aim is to help all communities, race and creed in Singapore.

HEALTH

To support and promote the physical and emotional health of individuals. Our aim is to provide for the physical, emotional and mental well-being for the single, unwed mothers and that of their children.

GROWTH

To provide financial literacy services. Our aim to provide for uplifting and supporting the mothers to grow as individuals and have financial independence and create a better future for themselves and their families.

Overview of Charity

Social Health Growth Ltd (“SHG”) was established on 16 February 2012 following extensive research by Chairman Mr. Alson Boo. His sole purpose is to improve the socio-economic conditions of unwed and/or single mothers in our community who were mostly left alone to fight their daily battles. SHG was formally registered as a Charity under the Charities Act (Chapter 37) in 2017.

Block 91 Henderson Resident Committee (RC) Centre was the first venue that SHG launched its pilot programs. With strong demand from unwed and/or single mothers in other areas, SHG has expanded to 7 centres across Singapore including Pipit Road RC Zone E, Jalan Bukit Merah, Bedok, Nee Soon South, Commonwealth, and Sengkang/Jalan kayu.

Organization Milestones

- **Mid 2017** - Registered as a full-fledged Charity Organisation
- **Aug 2017** - Obtained NCSS membership
- **Jun 2018** - Registered as an Institute of Public Character (“IPC”)
- **Feb 2019** - President’s Challenge 2019 award
- **Jan 2020** - Best Single Parent & Elder Care Support by APAC Insider
- **Nov 2020** - President’s Volunteerism & Philanthropy awards Special Edition 2020
- **Mar 2020** - President’s Challenge 2020 award
- **Mar 2021** - President’s Challenge 2021 award

Unique Registration Number (UEN): 201203801G

Registered Address:

12 Arumugam Road, #03-07B, LTC
Building B, Singapore 409958

Welcome Message from Chairman



SHG completed 12 years in February this year. I am pleased with the organisational growth and its contribution to the society. In initial years, we faced a lot of financial hardships to sustain and grow our volunteers and beneficiary programs. SHG received the President Award from 2019 to 2021 which was a key milestone for SHG. In 2023, we will be creating financial sustainability new partnership with SMEs and developing impact within the social community.

Since its establishment, SHG has always strived to reach out to more beneficiaries by expanding its centres and provide stronger support to the beneficiaries by adding new programs in line with the beneficiary's requirement. Since its start with centre at Henderson Road, SHG has expanded to 7 centres.

In 2019, we introduced Computer Literacy as a new program. SHG collaborated with Government Investment Corporation ("GIC") where GIC's volunteers assist and guide single parent and/or unwed mothers, including underprivileged children. The mothers were taught the technical know-how of operating MS Word, MS Excel and etc. while the children attended tuition classes taught by our professional tutors. GIC also sponsored SHG with MS surface book tablet for learning. GIC's program sessions benefited our beneficiaries tremendously leading to impressive progress in their computer literacy knowledge. Some SMEs have also employed our beneficiaries' mothers to work from home - thanks to the computer literacy program session conducted by GIC. Further, GIC was also awarded the MDIC award for making great contribution and social impact to the community. SHG aims to establish more Corporate Social Responsibility Partnership with Small Medium Enterprises and Multi-national Corporations to establish an Ecosystem and optimize the welfare for its beneficiaries.

Some of other programs launched includes Job creation, Health Workers and Health Dance. Our social enterprise with job creation has showed great traction that more than 12 SMEs employing our beneficiaries. Industries including F&B, import & export (foods), Fashion, retailers, office administration.

SHG has supported more than 7000 beneficiaries since 2012. With continued impact from Covid in 2022, we saw significant increases of beneficiaries (single parent and unwed mother) especially area Bukit Merah, Sengkang and Bedok. In 2022, we are expecting a significant increase beneficiaries by 30% to 40%.

Children has always been one of our key focus areas. Our volunteer engagement program has shown great increases as well. Individual volunteers are joining in teaching our beneficiaries and equip them with a relevant skill sets and knowledge so that they could get a better paying job. We saw significant increase in volunteer tutor, especially online teaching. We are hoping to engage more volunteer to join us in teaching the children. Some of the JCs and Polytechnic and SMU student join our children tutoring volunteer program.

During 2022, SHG received strong support from government in form of grant from President's Challenge Grant of SGD175,000. We would like to extend sincere thanks to Singapore Government for its support during the difficult Covid period. We also received donation from St James, NVPC, NCSS, Toteboard, PAG, GIC, MindChamps, which supported our program. Their CSR and donation drive will greatly benefit our beneficiaries.

It has been my privilege to serve as Chairman of SHG for the past 11 years. Looking ahead, I hope more donors and volunteers can come forward to support our cause of caring for the communities. No donation is too small with a willing heart. Let's journey together to better years.

Leadership

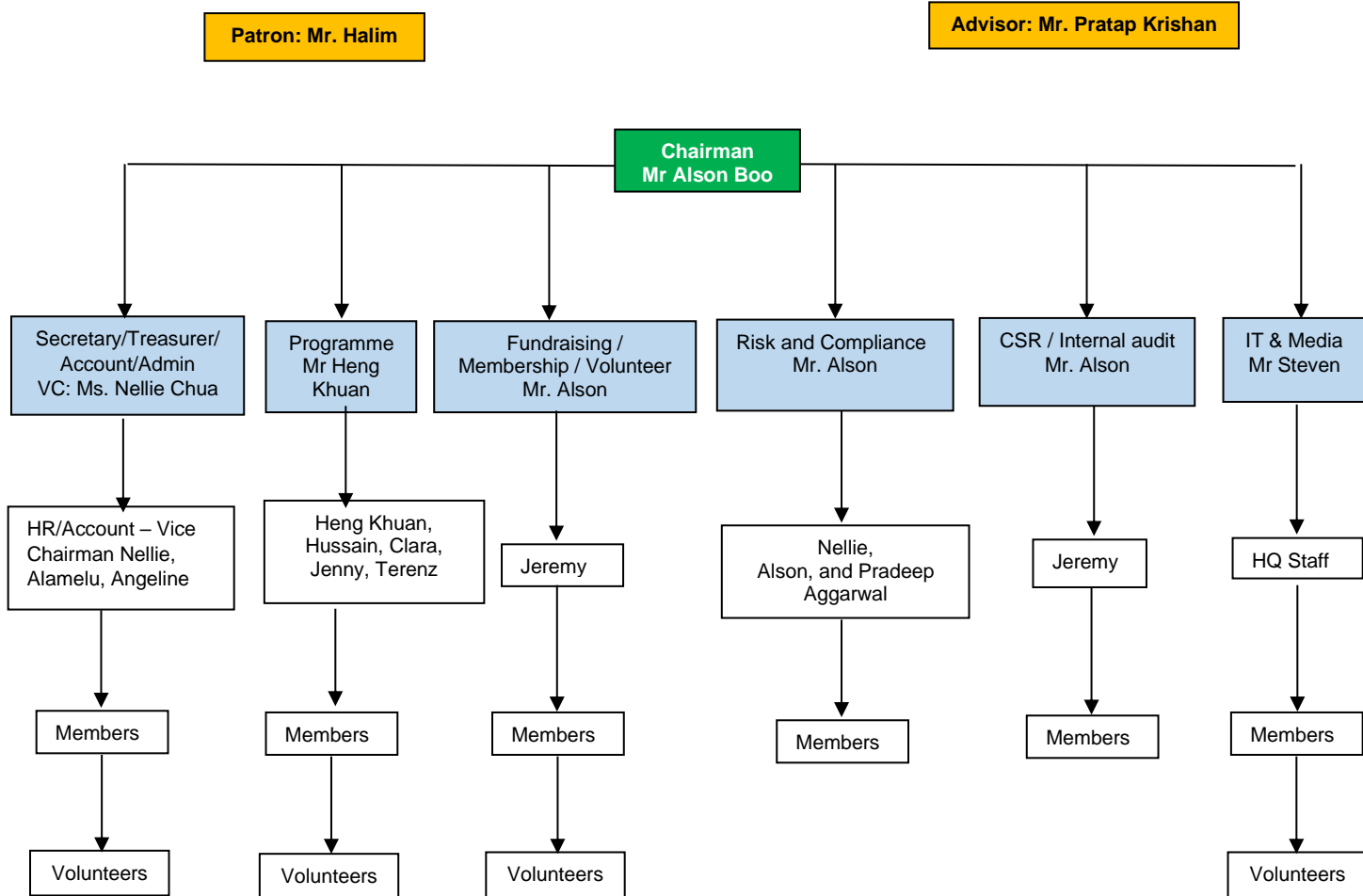
Governing Board Members/Management

Name	Designation	Date of Appointment
Mr Alson Boo	Chairman	16 Feb 2012
Ms Nellie Chua	Board Member	16 Feb 2016
Ong Peow	Board Member	30 Apr 2021

Advisory Council

Name	Designation	Date of Appointment
Pratap Kishan	Advisor to the Board	16 Feb 2016
Halim	Patron to the org	16 Feb 2015

Organizational Structure



Summary Financial Performance

	2022	2021	Change	% Change
Total Revenue	535,727	982,257	(446,530)	-46%
Total Expenditure	698,813	919,593	(220,780)	-24%
Surplus	(141,883)	61,564	(80,319)	-131%

- SHG donation has dropped by 50% due to covid19. But due to our strong past years reserve and long-term donors, they are still supporting SHG and continues to make donation. In light of the situation, we continue to be hopeful to see a significant increase of more than 80% in our donation in 2023. More corporates are coming forward to make donation particularly for impact and sustainable program. This partnership will increase our donation and it also shows corporate volunteering involvement.
- SHG is expanding its program so that more beneficiaries can benefit from them. Beneficiaries apply what they have learned and use it at their workplace. In 2021, we have increased our headcount and projects coverage and these expenditure can be carried forward to the following year. Consequently, as our deficit stood at -141,883.

Major Financial Transactions

The following list is non-exhaustive:

- Beneficiaries' support of SGD 256,600 for providing training to increases the skillsets and knowledge. E-commerce Development will help our beneficiaries to gain accessibility to home-based jobs. This addon will help our beneficiaries to meet their desired outcome progressively.
- Salaries at SGD 72,130
- Beneficiary Transportation at SGD 12,047
- Membership and Subscription are for Learning Management System annual fees and professional body licenses fees at SGD 15,248

Reserve Policy

Social Health Growth maintain a justifiable reserves policy for sustainability for the followings:

- 1) Must not be distracted from its core charitable purposes;
- 2) Take into full account the potential risks and returns, and not expose SHG assets to significant risk;
- 3) Have SHG investment policy approved by the Board;
- 4) Have SHG Board ensure transparency in our investments, and
- 5) Obtain advice from qualified professional advisors if deemed necessary by SHG Board.
- 6) Reserve policy of 1: - 0.48

Our Work: Programmes and Activities

SHG Ongoing Programmes

- 1) Financial Literacy**
- 2) Children Enrichment**
- 3) Women Empowerment Leadership Management**
- 4) Computer Literacy**
- 5) Job Creation**
- 6) Diaper and Milk Powder Rationing**
- 7) Youth Leadership financial literacy with SMU**
- 8) Elderly Health Dance Exercise**
- 9) English Language**
- 10) Food Rationing**
- 11) Health Worker program**
- 12) Coaching program**
- 13) Mobile Literacy**
- 14) Cyber Security program**
- 15) Chinese program**

The above programmes have achieved a breakthrough for online program between 30% to 40%. KPI of the success factor for each program are above our expected focus.

Our financial Literacy, woman empowerment, computer and mobile and children enrichment program has 85% success factor based on online test and assignment conducted by independent trainer, tutors/volunteers and CSR partners.

SMEs company has shared great computer and IT media knowledge to SHG's beneficiaries via its Computer Literacy and Mobile Programs. Beneficiaries have also shown significant improvement since its inception.

Our partnership with SMU's youth leadership program in financial literacy is one key program that will allow SHG to identify, train and groom potential youth leaders who will continue SHG's legacy and future goals.

Some notable highlights include the significant increase in Homebase and Job Placement within Small Medium Enterprises where numerous mothers were able to get a job. SHG will reach out to more SMEs to optimize beneficiary's opportunity for new job placements.

Other SHG's activities and donation platform include: Benevity, SimplyGiving, give2asia, globalgiving, give.asia and giving.sg

- **Saturday house visit** – once every 2 months
- **Bi-annual social networking night** – ad hoc planning
- **Yearly fund-raising event** – 2 or 3 planned events per year
- **Fund raising** on social media sites like Giving.sg, SHG's website, other online social media platform and collaboration with Singapore Buddhist Welfare Services, SANA, and Thye Hua Kwan (Tanjong Pagar).

Board Meetings

Number of Board meetings in the year 12 times

Individual Board member's attendance 12 times once every monthly.

Governance

Policies

SHG is governed by its Memorandum and Articles of Association dated 16th Feb'2012.

Board has also established various policies including Code of Conduct, Beneficiary policy, Reserve Policy etc.

Board Meetings and Attendance

A total of 3 Board meetings were held in this financial year. Most board meetings were attended by the individual Board Members and its respective Committee Members.

Disclosure of Remuneration and Benefits received by Board Members

No Board members were remunerated for their Board services in the financial year.

Governance Evaluation Checklist (requirement of Article 7A of Charities Act Chapter 37)

S.N.	Description	Response
Board Governance		
1	Induction and orientation are provided to incoming Board members on joining the Board.	<input checked="" type="radio"/> Complied <input type="radio"/> Not Complied
	Are there Board members also holding staff¹ appointments? (Skip items 2 and 3 if “No”)	<input type="radio"/> Yes <input checked="" type="radio"/> No
2	Staff does not chair the Board and does not comprise more than one-third of the Board.	<input type="radio"/> Complied <input type="radio"/> Not Complied
3	There are written job descriptions for their executive functions and operational duties which are distinct from their Board roles .	<input type="radio"/> Complied <input type="radio"/> Not Complied
4	<p>There is a maximum limit of four consecutive years for the Treasurer position (or equivalent, e.g. Finance Committee Chairman or person on Board responsible for overseeing the finances of the charity).</p> <p>Should the charity not have an appointed Board member for overseeing finances, it will be taken that the Chairman oversees the finances</p>	<input type="radio"/> Complied <input checked="" type="radio"/> Not Complied We have put in place succession planning to train committee member to be the successor.
5	All Board members submit themselves for re-nomination and re-appointment , at least once every three years.	<input checked="" type="radio"/> Complied <input type="radio"/> Not Complied
6	The Board conducts regular self-evaluation to assess its performance and effectiveness once per term or every three years, whichever is shorter.	<input checked="" type="radio"/> Complied, we have a board performance report yearly <input type="radio"/> Not Complied
	Are there Board member(s) who have served for more than 10 consecutive years? (Skip item 7 if “No”)	<input type="radio"/> Yes <input checked="" type="radio"/> No
7	The charity discloses in its annual report the reasons for retaining Board member(s) who have served for more than 10 consecutive years .	<input type="radio"/> Complied <input type="radio"/> Not Complied
8	There are documented terms of reference for the Board and each of its Board committees.	<input checked="" type="radio"/> Complied <input type="radio"/> Not Complied
Conflict of Interest		
9	There are documented procedures for Board members and staff to declare actual or potential conflicts of interest to the Board at the earliest opportunity	<input checked="" type="radio"/> Complied <input type="radio"/> Not Complied Our board member signed declaration

¹ Staff: Paid or unpaid individuals who are involved in the day-to-day operations of the charity, e.g. an Executive Director or Administrative personnel.

		conflicts of interest.
10	Board members do not vote or participate in decision-making on matters where they have a conflict of interest	<input checked="" type="radio"/> Complied <input type="radio"/> Not Complied
Strategic Planning		
11	The Board periodically reviews and approves the strategic plan for the charity to ensure that the activities are in line with its objectives.	<input checked="" type="radio"/> Complied , the board will review yearly its strategic plan <input type="radio"/> Not Complied
Human Resource and Volunteers² Management		
12	The Board approves documented human resource policies for staff	<input checked="" type="radio"/> Complied <input type="radio"/> Not Complied
13	There is a documented Code of Conduct for Board members, staff, members and volunteers (where applicable) which is approved by the Board.	<input checked="" type="radio"/> Complied <input type="radio"/> Not Complied
14	There are processes for regular supervision, appraisal and professional development of staff	<input checked="" type="radio"/> Complied , yearly staff appraisal <input type="radio"/> Not Complied
	Are there volunteers serving in the charity? (Skip item 15 if “No”)	<input checked="" type="radio"/> Yes <input type="radio"/> No
15	There are volunteer management policies in place for volunteers	<input checked="" type="radio"/> Complied , we have had a code of governance in place and all volunteer acknowledged <input type="radio"/> Not Complied
Financial Management and Internal Controls		
16	There is a documented policy to seek Board’s approval for any loans, donations, grants or financial assistance provided by the charity	<input checked="" type="radio"/> Complied <input type="radio"/> Not Complied
17	The Board ensures internal controls for financial matters in key areas are in place with documented procedures .	<input checked="" type="radio"/> Complied <input type="radio"/> Not Complied
18	The Board ensures reviews on the charity’s internal controls, processes, key programs and events are regularly conducted	<input checked="" type="radio"/> Complied, the board review it yearly <input type="radio"/> Not Complied
19	The Board ensures that there is a process to identify, regularly monitor and review the charity’s key risks .	<input checked="" type="radio"/> Complied, the board review it yearly <input type="radio"/> Not Complied

² Volunteer: Persons who willingly give up time for charitable purposes, without expectation of any remuneration. For volunteers who are involved in the day-to-day operations of the charity, they should also abide by the best practices set out in the Code applicable to ‘staff’.

20	The Board approves an annual budget for the charity's plans and regularly monitors its expenditure.	<input checked="" type="radio"/> Complied , the board plan and review it yearly <input type="radio"/> Not Complied
	Does the charity invest its reserves, including in fixed deposit? (Skip item 21 if "No")	<input type="radio"/> Yes <input checked="" type="radio"/> No
21	The charity has a documented investment policy approved by the Board.	<input type="radio"/> Complied <input type="radio"/> Not Complied
Fundraising Practices		
	Did the charity receive cash donations (solicited or unsolicited) during the year? (Skip item 22 if "No")	<input checked="" type="radio"/> Yes <input type="radio"/> No
22	All collections received (solicited or unsolicited) are properly accounted for and promptly deposited by the charity.	<input checked="" type="radio"/> Complied <input type="radio"/> Not Complied
	Did the charity receive donations-in-kind during the year? (Skip item 23 if "No")	<input checked="" type="radio"/> Yes <input type="radio"/> No
23	All donations-in-kind received are properly recorded and accounted for by the charity	<input checked="" type="radio"/> Complied , recorded in financial report <input type="radio"/> Not Complied
Disclosure and Transparency		
24	The charity discloses in its annual report: i) Number of Board meetings in the year; and ii) Individual Board member's attendance	<input checked="" type="radio"/> Complied , <input type="radio"/> Not Complied
	Are Board members remunerated for their Board services? (Skip items 25 and 26 if "No")	<input type="radio"/> Yes <input checked="" type="radio"/> No
25	No Board member is involved in setting his or her own remuneration.	<input type="radio"/> Complied <input type="radio"/> Not Complied
26	The charity discloses the exact remuneration and benefits received by each Board member in its annual report. <u>OR</u> The charity discloses that no Board members are remunerated.	<input type="radio"/> Complied <input type="radio"/> Not Complied
	Does the charity employ paid staff? (Skip items 27,28 and 29 if "No")	<input type="radio"/> No <input checked="" type="radio"/> Yes
27	No staff is involved in setting his or her own remuneration.	<input checked="" type="radio"/> Complied <input type="radio"/> Not Complied
28	The charity discloses in its annual report: i. The total annual remuneration (including any remuneration received in its subsidiaries), for each of its three highest paid staff , who each receives remuneration exceeding \$100,000 , in bands of \$100,000; and ii. If any of the three highest paid staff also serves on the Board of the charity. <u>OR</u>	<input checked="" type="radio"/> Complied <input type="radio"/> Not Complied No staffs are serve in the board.

	The charity discloses that none of its staff receives more than \$100,000 in annual remuneration each.	
29	<p>The charity discloses the number of paid staff who are close members of the family of the Executive Head or Board Members, who each receives remuneration exceeding \$50,000 during the year, in bands of \$100,000.</p> <p><u>OR</u></p> <p>The charity discloses that there is no paid staff who are close members of the family³ of the Executive Head or Board Member, who receives more than \$50,000 during the year.</p>	<p>● Complied ○ Not Complied</p> <p>All board member are not remunerated and their not staff.</p>
30	The charity has a documented communication policy on the release of information about the charity and its activities across all media platforms.	<p>● Complied ○ Not Complied</p>

³ Close members of the family: Those family members who may be expected to influence, or be influenced by, that person in their dealings with the charity. In most cases, they would include:

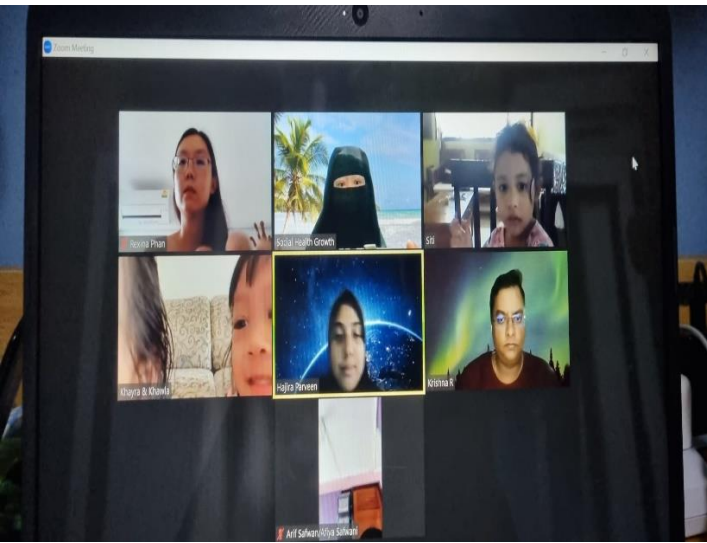
- That person's children and spouse;
- Children of that person's spouse; and
- Dependants of that person or that person's spouse.

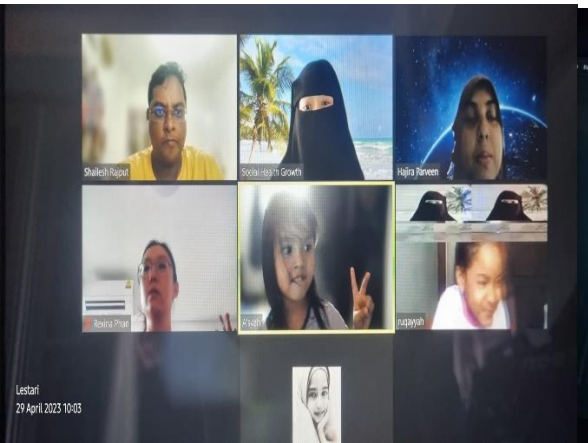
SHG @ Work











Audited Annual Accounts

SOCIAL HEALTH GROWTH LTD.

Co Registration No. 201203801G

STATEMENT OF PROFIT OR LOSS AND OTHER COMPREHENSIVE INCOME

For the financial year ended 31 December 2022

	Note	2022 S\$	2021 S\$
INCOME			
Voluntary income			
Donations	(4)	209,783	461,580
Membership fee		3,199	4,374
Event income		-	1,160
Grant income	(5)	288,374	469,909
Toteboard fund receipts		<u>34,371</u>	<u>20,485</u>
		<u>535,727</u>	<u>957,508</u>
Other income			
Government grant		12,827	23,649
Miscellaneous income		<u>8,376</u>	<u>-</u>
	(6)	<u>21,203</u>	<u>23,649</u>
TOTAL INCOME		<u>556,930</u>	<u>981,157</u>
EXPENDITURE			
Cost of charitable activities			
Beneficiary support		415,001	84,597
Donations		-	14,201
Event expenses		<u>-</u>	<u>(2,876)</u>
		<u>415,001</u>	<u>95,922</u>
Administrative and general expenses			
Accounting and audit fee		11,760	10,773
Advertisement		63	3,968
Bank charges		2,754	770
Course fee		-	86,641
CPF Contribution	(7)	11,268	36,142
Depreciation of plant and equipment	(8)	13,569	9,122
Ecommerce Development		82,004	5,350
Grant application drafting		-	78,500
Insurance		4,796	4,766
Medical expenses		357	296
Membership & Subscription		15,248	5,974
Members welfare		214	5,916
Office tools and maintenance		<u>1,369</u>	<u>5,193</u>
Balance carried forward		<u>143,402</u>	<u>253,411</u>

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

SOCIAL HEALTH GROWTH LTD.*Co Registration No. 201203801G***STATEMENT OF PROFIT OR LOSS AND OTHER COMPREHENSIVE INCOME***For the financial year ended 31 December 2022*

	Note	2022 S\$	2021 S\$
Balance brought forward		143,402	253,411
Other expenses		492	3,804
Printing & postage		6,545	5,648
Professional fee		-	3,052
Refreshment		405	1,082
Rental - others		25,463	5,639
Rental sponsorship		-	22,470
Repair and maintenance		3,130	224
Salaries and bonus	(7)	72,130	224,167
Staff allowances	(7)	13,260	18,638
Telecommunication		4,570	7,599
Training fee		-	256,600
Transportation / Conveyance		12,047	19,615
Utilities		2,368	1,577
Website hosting		-	145
		<u>283,812</u>	<u>823,671</u>
TOTAL EXPENSES		<u>698,813</u>	<u>919,593</u>
Surplus/(Deficit) for the year, representing total comprehensive income/(loss) for the year		<u>(141,883)</u>	<u>61,564</u>

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

SOCIAL HEALTH GROWTH LTD.
Co Registration No. 201203801G

STATEMENT OF FINANCIAL POSITION
As at 31 December 2022

	Note	2022 S\$	2021 S\$
ASSETS			
Non-current assets			
Plant and equipment	(8)	<u>104,460</u>	<u>118,029</u>
Current assets			
Other receivables	(9)	10,335	11,175
Cash and cash equivalents	(10)	<u>41,996</u>	<u>188,090</u>
		<u>52,331</u>	<u>199,265</u>
TOTAL ASSETS		<u>156,791</u>	<u>317,294</u>
FUND AND LIABILITIES			
Fund			
Accumulated funds		<u>152,291</u>	<u>294,174</u>
Current liabilities			
Other payables	(11)	<u>4,500</u>	<u>23,120</u>
TOTAL LIABILITIES		<u>4,500</u>	<u>23,120</u>
TOTAL FUND AND LIABILITIES		<u>156,791</u>	<u>317,294</u>

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

SOCIAL HEALTH GROWTH LTD.

Co Registration No. 201203801G

STATEMENT OF CHANGES IN FUND

For the financial year ended 31 December 2022

	<u>Accumulated</u> <u>fund</u> S\$
2022	
At 1 January 2022	294,174
Total comprehensive loss for the year	(141,883)
At 31 December 2022	<u>152,291</u>
2021	
At 1 January 2021	232,610
Total comprehensive income for the year	61,564
At 31 December 2021	<u>294,174</u>

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

SOCIAL HEALTH GROWTH LTD.*Co Registration No. 201203801G***STATEMENT OF CASH FLOWS***For the financial year ended 31 December 2022*

	Note	2022	2021
		S\$	S\$
<u>Cash flows from operating activities</u>			
(Deficit)/Surplus for the year		(141,883)	61,564
<u>Adjustments for:</u>			
Depreciation of plant and equipment	(8)	13,569	9,122
Operating cash flows before working capital changes		(128,314)	70,686
<u>Changes in working capital:</u>			
Other receivables		840	(3,590)
Deferred income		(1,912)	-
Other payables		(16,708)	(48,592)
Net cash (used in)/generated from operating activities		(146,094)	18,504
<u>Cash flows from investing activity</u>			
Acquisition of plant and equipment	(8)	-	(111,328)
Net cash used in investing activities		-	(111,328)
Net decrease in cash and cash equivalents		(146,094)	(92,824)
Cash and cash equivalents at 1 January		188,090	280,914
Cash and cash equivalents at 31 December	(10)	41,996	188,090

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

SOCIAL HEALTH GROTH LTD.*Co Registration No. 201203801G***NOTES TO THE FINANCIAL STATEMENTS***For the financial year ended 31 December 2022***4. Donations**

The Company is registered as a charity under the Charities Act, Chapter 37, and as approved institution at Public Character ("IPC"). The Company has been conferred the Institution of a Public Character ("IPC") status for the period from 19 June 2021 to 18 December 2022 and has been renew from 19 December 2022 to 18 January 2024.

As an IPC, the Company enjoys a concessionary tax treatment whereby qualifying donors are granted 2.5 times tax deduction for the donations made to the Company. The tax-exempt receipts for donations collected during the year are as follows:

	2022 S\$	2021 S\$
Tax-exempt receipts issued	54,747	461,580
Non tax-exempt receipts	<u>155,036</u>	-
	<u>209,783</u>	<u>461,580</u>

5. Grant Income

	2022 S\$	2021 S\$
Bicentennial Community Fund grant	-	291,332
NCSS Trust Fund	250,000	21,934
President's Challenge	-	141,000
Singapore Strong Fund	-	2,500
Silver Volunteer Fund	4,268	13,143
NCSS The Courage Fund	4,700	-
NCSS Tech and Co	<u>29,406</u>	-
	<u>288,374</u>	<u>469,909</u>

6. Other income

	2022 S\$	2021 S\$
Jobs Growth Incentive	9,033	13,943
Jobs Support Scheme	-	7,673
Government grant	3,794	2,033
Miscellaneous income	<u>8,376</u>	-
	<u>21,203</u>	<u>23,649</u>

SOCIAL HEALTH GROTHW LTD.

Co Registration No. 201203801G

NOTES TO THE FINANCIAL STATEMENTS

For the financial year ended 31 December 2022

7. Staff costs

	2022	2021
	S\$	S\$
Staff salaries and bonuses	72,130	224,167
Staff Allowance	13,260	18,638
CPF Contribution	11,268	36,142
	<u>96,658</u>	<u>278,947</u>

Whistleblowing

Key Points

The Whistleblowing Procedure sets out the framework for dealing with allegations of illegal and improper conduct.

The SHG is committed to the highest standards of transparency, probity, integrity and accountability.

This procedure is intended to provide a means of making serious allegations about standards, conduct, financial irregularity or possible unlawful action in a way that will ensure confidentiality and protect those making such allegations in the reasonable belief that it is in the public interest to do so from being victimised, discriminated against or disadvantaged.

This procedure does not replace other policies and procedures such as the complaints procedure, the Grievance and Harassment and Bullying Policies and other specifically laid down statutory reporting procedures.

This procedure is intended to ensure that the SHG complies with its duty under the November 2014 Whistleblowing in the Public Sector.

Scope

This procedure applies to all SHG employees, including Associates and contractors.

This procedure does not replace other SHG policies or procedures. For example, if an employee has a grievance about their working conditions they should use the SHG Grievance Policy or, if they felt that their manager or a colleague was treating them unfavourably, they should use the SHG Harassment and Bullying Policy. Similarly if an employee has a concern about the conduct of a fellow employee in the working environment (e.g. that they are not treating colleagues with respect) they should raise these with their line manager.

This procedure applies to, but is not limited to, allegations about any of the following:

- Conduct which is an offence or breach of the law
- Alleged miscarriage of justice
- Serious Health and Safety risks
- The unauthorised use of public funds
- Possible fraud and corruption
- Sexual, physical or verbal abuse, or bullying or intimidation of employees, customers or service users
- Abuse of authority
- Other unethical conduct

Reporting

Contact Details for Reporting: (in writing) SHG

The SHG recognises that the decision to make an allegation can be a difficult one to make. However, whistleblowers who make serious allegations in the reasonable belief that it is in the public interest to do so have nothing to fear because they are doing their duty either to the SHG and/or to those for whom the SHG or they are providing a service.

The SHG will take appropriate action to protect a whistleblower who makes a serious allegation in the reasonable belief that it is in the public interest to do so from any reprisals, harassment or victimisation.

Confidentiality

All allegations will be treated in confidence and every effort will be made not to reveal a whistleblower's identity unless the whistleblower otherwise requests. However, if the matter is subsequently dealt with through other SHG procedures such as the Disciplinary Procedure.

Similarly, if the allegation results in court proceedings then the whistleblower may have to give evidence in open court if the case is to be successful.

The SHG will not, without the whistleblower's consent, disclose the identity of a whistleblower to anyone other than a person involved in the investigation/allegation.

Anonymous Allegations

This procedure encourages whistleblowers to put their name to an allegation wherever possible as anonymous allegations may often be difficult to substantiate/prove. Allegations made anonymously are much less powerful but anonymous allegations will be considered at the discretion of the Chairman/Vice Chairman.

In exercising discretion to accept an anonymous allegation the factors to be taken into account:

- The seriousness of the issue raised
- The credibility of the allegation; and
- Whether the allegation can realistically be investigated from factors or sources other than the complainant

Untrue Allegations

No disciplinary or other action will be taken against a whistleblower who makes an allegation in the reasonable belief that it is in the public interest to do so even if the allegation is not substantiated by an investigation. However, disciplinary action may be taken against a whistleblower who makes an allegation without reasonable belief that it is in the public interest to do so (e.g. making an allegation frivolously, maliciously or for personal gain where there is no element of public interest).

Procedure for Making an Allegation

It is preferable for allegations to be made to an employee's immediate manager to whom they report. However, this may depend on the seriousness and sensitivity of the issues involved and who is suspected of malpractice. For example, if the whistleblower believes that management is involved it would be inappropriate to raise it directly with them. The whistleblower may then make an allegation direct to any of the following:

- The Chairman
- Vice-Chairman

If either of the above receive an allegation he/she will consider the allegation and may discuss with either the Chairman or Executive Director. The line manager (or either/or both) of the above, after consideration, will discuss with the whistleblower and if they wish to proceed with the allegation will be investigated.

Allegation

Whether a written or oral report is made it is important that relevant information is provided including:

- The name of the person making the allegation and a contact point.
- The background and history of the allegation (giving relevant dates and names and positions of those who may be in a position to have contributed to the allegation);
- The specific reason for the allegation. Although someone making an allegation will not be expected to prove the truth of any allegations, they will need to provide information to the person they have reported to, to establish that there are reasonable grounds for the allegation.

Someone making an allegation may be accompanied by another person of their choosing during any meetings or interviews in connection with the allegation. However, if the matter is subsequently dealt with through another procedure the right to be accompanied will at that stage be in accordance with the relevant procedure.

Action on receipt of an Allegation

The line manager will record details of the allegation gathering as much information as possible, (within 5 working days of receipt of the allegation) including:

- The record of the allegation:
- The acknowledgement of the allegation;
- Any documents supplied by the whistleblower.

The investigator will ask the whistleblower for his/her preferred means of communication and contact details and use these for all communications with the whistleblower in order to preserve confidentiality.

If the allegation relates to fraud, potential fraud or other financial irregularity the Treasurer will be informed within 5 working days of receipt of the allegation. The Treasurer will determine whether the allegation should be investigated and the method of investigation.

If the allegation discloses evidence of a criminal offence it will immediately be reported to the Board of Directors and a decision will be made as to whether to inform the Police. If the allegation concerns suspected harm to children the appropriate authorities will be informed immediately.

Timetable

- An acknowledge the allegation in writing within 10 working days with
 - An indication of how the SHG propose to deal with the matter
 - An estimate of how long it will take to provide a final response
 - An indication of whether any initial enquiries have been made
 - Information on whistleblower support mechanisms
 - Indication whether further investigations will take place and if not, why not

Where the allegation has been made internally and anonymously, obviously the SHG will be unable to communicate what action has been taken.

Support

The SHG will take steps to minimise any difficulties which may be experienced as a result of making an allegation. For instance, if a whistleblower is required to give evidence in criminal or disciplinary proceedings the SHG will arrange for them to receive advice about the procedure and advise on the support mechanisms that are available.

The SHG accepts that whistleblowers need to be assured that the matter has been properly addressed. Thus, subject to legal constraints, we will inform those making allegations of the outcome of any investigation.

Responsibility for the Procedure

The Chairman and Vice Chairman have overall responsibility for the operation of this Procedure and for determining the administrative processes to be followed and the format of the records to be kept.

Monitoring

A Register will record the following details:

- The name and status (e.g. employee) of the whistleblower

- The date on which the allegation was received
- The nature of the allegation
- Details of the person who received the allegation
- Whether the allegation is to be investigated and, if yes, by whom
- The outcome of the investigation
- Any other relevant details

The Register will be confidential and only available for inspection by the Board of Trustees.

The Executive will report annually to the Board of Director on the operation of the Procedure and on the whistleblowing allegations made during the period covered by the report. The report will be in a form which does not identify whistleblowers.

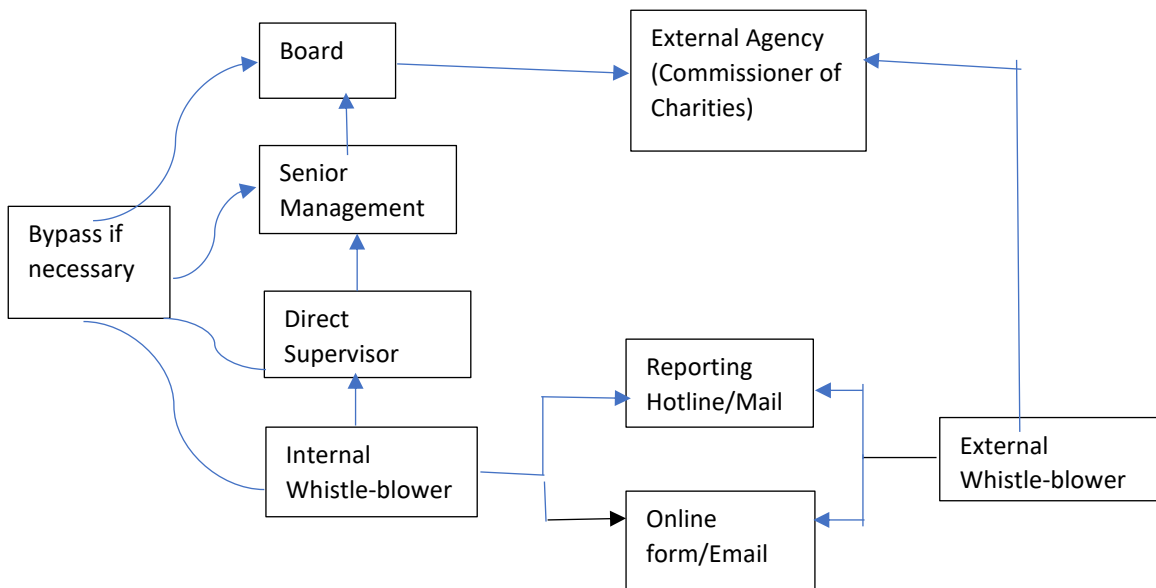


Diagram 1: Ways to Raise Concerns for Employees and Other Stakeholders

The decision on the contents and details of a policy to suit the needs of the SHG requires judgements. Seven Key components are commonly included in the policy are as followings:

Component : *Policy Objectives*

1. Policy Objectives	Set the tone and what it aims to achieve
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What to include		
Define whistle-blowing concern	Importance of whistle-blowing	Objectives of policy
Illustration		
<p>To whistle-blow is to report concerns by employees or other stakeholders in good faith on misconduct or malpractice that may be detrimental to the charity and/or public interest. Whistle-blowing is an essential part of sound governance.</p> <p>The police addresses the Board's commitment to proper ethical behaviour where employees and other stakeholders are encouraged to report concerns without fear of reprisal or unfair treatment.</p> <p>The objectives of the policy are:</p> <ul style="list-style-type: none"> • To provide a formal process to raise and handle whistle-blowing concerns and a framework to support the process. • To encourage employees and other stakeholders to report improper, unethical and inappropriate behaviour. • To provide assurance that all reports will be properly addressed, treated with confidentiality and there are adequate whistle-blower safeguards from reprisal in any form. • To promote and develop a culture of accountability, integrity and transparency. 		

Component 2: Policy Scope

2. Policy Scope	Set the tone and what it aims to achieve
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What to include?	
Extent of policy coverage	
Illustration	
This policy is designed to enable employees and other relevant stakeholders to report any alleged concerns in good faith on misconduct or malpractice.	

Component 3: Roles and Responsibilities

3. Roles and Responsibilities	Structure of accountability and responsibility
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What to include	
Whistle-blowing structure	Roles and Responsibility
Illustration	
<p>The Board oversees whistle-blowing practices in the charity. This oversight responsibility requires the establishment of a whistle-blowing policy that is relevant to the context of the charity.</p> <p>The Board is usually assisted by a staff in charge (or Whistle-blowing Governance Officer) of the whistle-blowing process who ensures that the procedures are carried out in accordance with the policy.</p> <p>In essence, there are many stakeholders involved in the whistle-blowing process. These include the Board, whistle-blower, alleged party, staff receiving the report, investigator, Whistle-blowing Governance Officer and Head of Internal Audit.</p>	

Component 4: Confidentiality & Protection

4. Confidentiality & Protection	Underpinning ethos of whistle-blowing practice
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4(a) Confidentiality: What to include		
Commitment to confidentiality	Anonymous reporting	Special circumstances for identity disclosure
Illustration		
<p>The charity respects the confidentiality of the whistle-blower and is committed to preserving confidentiality by keeping the report and case information secure and accessible only to designated persons. Aligned with the spirit of confidentiality, the charity allows anonymous reporting.</p> <p>Confidentiality has two sides. Concurrently, the Whistle-blowing Governance Officer should ensure proper confidentiality safeguards of the filed report, while maintaining the confidentiality of those involved in the case.</p> <p>If necessary or lawful circumstances dictate the disclosure of the whistle-blower's identity, the charity must seek the whistle-blower's consent.</p>		

4(b) Protection: What to include		
Commitment to protection	Types of protection	Sanctions
Illustration		
The charity does not condone any reprisal, discrimination or harassment against whistle-blowers who report in good faith. It is committed to protecting whistle-blowers from threats to employment		

and any other threats of retaliatory action. Disciplinary actions will be taken against those who retaliate, harass or discriminate against whistle-blowers.

Component 5: Whistle-blowing Process

5. Whistle-blowing process	Key steps in the whistle-blowing process
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5(a). Whistle-blowing process: Initiation
Purpose: 1 st step in the whistle-blowing process
What to include?

Proper report contents	Authorised personnel	Method of reporting
Illustration		
<p>The ambit of reporting covers whistle-blowing concerns made in good faith either internally or externally. Disciplinary action will be taken against employees for any false report made for personal gain or malicious motive.</p> <p>The report can be made verbally or in writing using the standard “Form to Report a Whistle-Blowing Concern” (see page 17) which contains information on what to report. For all reports, including those raised anonymously, the charity will maintain a proper register of all concerns received. It will send an acknowledgment of receipt to the whistle-blower, if the identity is provided, and all reported concerns will be assessed by the charity. The whistle-blower should also be provided with subsequent information on the follow-up processes (e.g. assessment, investigation and action) as appropriate.</p> <p>Where the identity of the alleged person is known, the guidance should include reasonable timeframes for: (a) the escalation of alleged concern to the Whistle-Blowing Governance Officer (or any designated person) (e.g. within 24 hours); (b) the formal acknowledgment of receipt, (e.g. within two weeks); (c) any updates; and (d) the closure of the inquiry. More specifically, (a) and (d) are considered in relation to anonymous alleged concern.</p> <p>Typically, an employee is expected to raise the concerns with their immediate superior, who will escalate the matter to the Whistle-Blowing Governance Officer (or the staff in charge of whistle-blowing).</p> <p>In cases where the immediate superior is reluctant to raise the concern or is the subject of the concern, the whistle-blower can raise the concern directly to the Whistle-Blowing Governance Officer. In cases where key management is involved or the concern is exceptionally serious, the whistle-blower can report to the chairman of the Board or designated Board member (e.g. chairman of the Audit committee).</p> <p>The whistle-blower can bypass the internal reporting mechanism and report the concern to the relevant external agency (e.g. Office of the Commissioner of Charities). Safeguards to protect confidentiality must be in place to protect the whistle-blower from reprisal, discrimination and other adverse consequences.</p>		

5(b) Whistle-blowing process: Assessment		
Purpose: 2 nd step in the whistle-blowing process.		
What to include?		
Assessment Personnel	The assessment criteria	The outcome
Illustration		
<p>The Whistle-blowing Governance Officer (or a designated staff) is responsible for the assessment of all the concerns raised, including those which are anonymous in nature. The assessment examines whether the concerns raised are appropriate (i.e. they are not grievances), information provided is adequate to facilitate in the assessment and the nature of concerns (e.g. threats to</p>		

health and safety, breach of laws, ethical code and fraud) to establish their severity and implication to the charity.

When the alleged person's identity is not known, attention should be made in relation to the likelihood of substantiating the allegation from the information provided and any relevant sources. All assessments and analysis are to be consistent and properly documented, with decisions and outcomes clearly communicated to the appropriate parties on a timely basis.

Inappropriate concerns will not be investigated and the responsible staff may be subject to disciplinary action. Except for anonymous reports, the whistle-blowers may be contacted for clarification or further details on the information provided in the "Form to Report a Whistle-Blowing Concern".

5(c) Whistle-blowing process: Investigation		
Purpose: 3 rd step in the whistle-blowing process.		
What to include?		
The investigator	The investigation team	All other parties involved
The investigation process	The outcome	Recourse availability
Illustration		
<p>The Whistle-blowing Governance Officer (or a designated staff) is responsible for the appointment of the investigator and members of the investigation team, where appropriate. If required, the Board or the Audit Committee should endorse the recommendation before formal appointment.</p> <p>The charity will assure the independence of the investigator in the performance of the investigation. The investigation team is empowered with the appropriate authority and must have the integrity and competency to gather and document facts, while preventing leakage of information. The charity will provide adequate support, co-operation and access of information to the investigator.</p> <p>The parties involved in the investigation would be determined by the investigator depending on the nature, extent, timeline and complexity of the case. Some possible parties may include the whistle-blower, alleged party, witnesses, key staff, management, Board members and external parties. Further information may be sought from the whistle-blower and the relevant parties in the investigation.</p> <p>The charity's investigation process comprises establishing the investigation objective, gathering of evidence, reporting on the findings and providing recommendations. The duration of the investigation is dependent on the nature of the concern, evidence availability and complexity of the case. The whistle-blower will be informed as soon as the investigation outcome is available.</p> <p>The investigation report will be reviewed by the Board or Audit Committee or a designated committee (e.g, comprising Head of Human Resources, Chief Internal Auditor and other key personnel). Where appropriate, external advice may be sought to assist in the investigation and review of the investigation report (including the findings and recommendations).</p> <p>The possible outcomes include:</p> <ol style="list-style-type: none"> i. There are no grounds for the concern. Hence, there are no further actions required. ii. There are grounds for the concern. Disciplinary action will be taken in accordance with the charity's disciplinary policies (e.g. reprimand, suspension and termination of employment). In addition, remedial measures will be taken to minimise recurrence; and iii. There may be grounds for a possible criminal offence. The Board of Audit Committee should be informed and legal advice may be sought on whether the matter should be referred to the relevant authority for the appropriate action. In all these circumstances, the whistle-blower will be notified of the outcome accordingly. <p>When the whistle-blower is not satisfied with the outcome of the investigation, he/she can raise the matter with adequate explanation to the Whistle-blowing Governance Officer (or designated</p>		

staff). If there are reasonable grounds, the charity will examine the concern. The whistle-blower can also raise this concern to an external party.

5(d) Whistle-blowing process: Action		
Purpose: 4 th step in the whistle-blowing process.		
What to include?		
Timeline for recommended course of action	Proper closure	Review and follow-up
Illustration		
<p>In cases where there are no grounds for the concern, the Whistle-blowing Governance Officer (or a designated staff) will inform the whistle-blower of the outcome and close the case. Where there is ground for the concern, the Whistle-blowing Governance Officer must ensure that there is a person responsible for disciplinary matters (e.g. Head of Human Resources) and another person responsible for designing and implementing the remedial measures, which should be both practical and feasible.</p> <p>When the matter has to be escalated to an external party, there should be an acknowledgment of the receipt of the referral. The timeline for the implementation of the recommendation should be established to provide an indication on the closure of each case.</p> <p>There should be a review and a follow-up by the Whistle-blowing Governance Officer (or a designated staff) with support provided by the Board or Audit Committee to ensure the proper closure of the case.</p>		

Component 6: Communications & Training

6. Communications & Training	Update and equip with proper competencies
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What to include?		
Access to the policy	Avenues for clarification	Training and assistance
Illustration		
<p>The whistle-blowing policy is provided to employees by the Head of Human Resources, whistle-blowing Governance Officer or a designated staff. It is also accessible to all interested parties in the charity's website.</p> <p>The whistle-blowing policy is communicated to all staff when they join the charity and they are briefed on any updates as appropriate. For assistance on whistle-blowing matters, employees should approach the Head of Human Resources, Whistle-blowing Governance Officer or the designated staff.</p> <p>The charity supports the training of staff involved in whistle-blowing to stay abreast of developments and to be properly equipped to handle whistle-blowing matters.</p>		

Component 7: Monitor & Review

7. Monitor & Review	Ensure the whistle-blowing practice is relevant and effective
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What to include?	
Effective monitoring methods	Periodic review interval
Illustration	
<p>The Whistle-blowing Governance Officer or a designated staff monitors the status of the whistle-blowing process to ensure that it is operating as designed. Some examples include the trend of concerns raised compared to previous years, the number of concerns that failed to meet the</p>	

established timeline, to record and report to the Whistle-blowing Governance Officer, and the number of cases where the investigation process is behind schedule. The monitored results should be reported to the Board of Audit Committee.

Internal audit or an independent party will review the whistle-blowing policy for design effectiveness and will check that the procedures are operationally effective. The review is conducted annually or as directed by the Board or Audit Committee.

A policy is an important governance document. Some attributes of an effective policy are:

- It is easily understood.
- It has clearly defined objectives and is aligned with the charity's goals and strategy.
- It is relevant to the changing charity contexts.
- The key stakeholders are appropriately consulted in its development and update.
- It is easily accessible and clearly communicated to the relevant stakeholders.

The contents and details in the sample below may be adapted by charities to develop a whistle-blowing policy to suit their contexts and needs. It is drawn up from a selection of Singapore charities.

1. Policy objectives and scope	The organisation is committed to a high standard of transparency, integrity, compliance and accountability. The whistle-blowing policy aims to provide a means through which employees or members of the public could, in good faith, report any activity that infringes on the organisation's code of conduct or violates the law so that the organisation may take the relevant action.
2. Whistle-blowing concerns	The policy covers serious concerns that could have a significant impact on the organisation. These include (a) fraudulent activity; (b) incorrect financial reporting; (c) unlawful activities; (d) misconduct or unethical conduct.
3. Confidentiality and protection	Reports of whistle-blowing concerns are kept confidential to the extent possible to meet the needs of the investigation. The organisation is committed to protect a person who reports in good faith from intimidation, retaliation or adverse employment consequence.
4. Reporting channels	If employees or members of the public have cause to suspect serious concerns, a report should be made through telephone, by e-mail or by postal mail. All reports will be channelled to the Board Chairman and members of the Audit Committee. Alternatively, the report may be lodged directly with any of these individuals.
5. Assessment of concerns raised	Assessment of the concern is based on the nature and severity of the concern raised and the credibility of the information, including the resources. The Audit Committee or a designated staff shall decide whether an investigation is required to examine the issues raised. For a serious concern (e.g. alleged criminal offence), the matter should be reported to an external agency.
6. Investigation	On receiving a report, the Board or the Audit Committee shall decide on the severity and authenticity of the concern. When there are issues to be further examined, the Board or the Audit Committee will set up an investigation team, comprising at least three independent members (i.e. those who are not connected to the concern reported). The whistle-blower will be kept informed of the progress of the investigation and, if appropriate, of the final outcome.

An illustration of roles and responsibilities

Key Stakeholders	Responsibilities
Board	<ul style="list-style-type: none"> • To ensure the effective establishment, review and management (e.g. reporting, investigation and follow-up) of the whistle-blowing policy and arrangements.

	<ul style="list-style-type: none"> • Should regularly review and discuss all whistle-blowing concerns. • The chairman of the Board or designated director(s) may serve as the Whistle-blower Governance Officer for concerns raised on key management (e.g. head of the organisation). In practice, the above roles may be delegated to the Audit Committee.
Whistle-blower	<ul style="list-style-type: none"> • Expected to act in good faith and should refrain from making false accusations when reporting his/her concern(s). • They should also contribute to the investigation efforts (e.g. by providing further information/evidence).
Alleged Party (The person of interest in the whistle-blowing case)	<ul style="list-style-type: none"> • Have a duty to cooperate with the investigator, including the provision of relevant information, documents or other materials as may be required by the investigator.
Point of Contact/Staff receiving the report	<ul style="list-style-type: none"> • To receive, record and report the whistle-blowing incident to the person in-charge of whistle-blowing or the appropriately assigned individual. • At all times, confidentiality of the case must be maintained.
Investigator	<ul style="list-style-type: none"> • To ensure investigations are conducted in an independent, diligent and unbiased manner. • To regularly report findings to the Whistle-blowing Governance Officer, Board or Audit Committee (as appropriate). • The investigator and team (if required) must be independent, competent and refrain from discussing or disclosing confidential information under investigation. The investigation may include external parties with the appropriate competencies to assist in the investigation.
Whistle-blowing Governance Officer	<p>The Whistle-blowing Governance Office is in charge of the whistle-blowing process. Where the concerns reported involve key management, the Board will appoint one or two members of the Board (e.g. Audit Committee chair and other director(s) to assume this role.</p> <p>Some of the responsibilities include:</p> <ul style="list-style-type: none"> • To ensure that sufficient inquiry is conducted into every concern received. • The case is investigated by a qualified investigator who is independent of the area/function where the concern is alleged to have taken place. • To recommend whether an external qualified investigator independent of the organisation is required. • The action taken in response to the assessment/investigation is appropriate to the circumstances. • There are adequate safeguards to protect the whistle-blower from reprisal, discrimination or harassment. A whistle-blower Protection Officer may be appointed to the task. • To ensure the adequate measures are in place to protect the confidentiality of the whistle-blower and information about the case.
Head of Internal Audit	<ul style="list-style-type: none"> • Where the charities or IPCs have an internal audit function, the internal audit provides assurance to the Board on the design and operative effectiveness of the whistle-blowing policy and arrangements. The other roles that internal audit can assume may include the handling of whistle-blowing concerns, whistle-blowing

	investigation as well as providing advice on the relevant internal controls in the whistle-blowing process.
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A sample form to report a whistle-blowing concern

Whistle-Blower Report Form	
Whistle-blower's details	
This section may be left blank if the whistle-blower wishes to remain anonymous.	
Name, Designation/Charity, Contact number and E-mail address	
Can you be contacted for more information?	
Alleged Party's details	
Name, Designation, Department, Contact number and E-mail address	
Witness' details (if any)	
Name, Designation, Department/Charity, Contact number and E-mail address	
Concern/Complaint	
Describe the misconduct and how you have come to know about it.	
1. What misconduct occurred?	
2. Who committed the misconduct?	
3. When did it happen and when did you notice it?	
4. Where did it happen?	
5. Have you approached the person? If yes, what did he say?	
6. Is there any evidence that you could provide to us?	
7. Were other people involved? If yes, who are they?	
8. Do you have any other details or information which could assist us in the investigation?	
9. Have you reported the incident internally or through any other channels? If yes, to whom have you made the report?	
Date:	Signature

Who to submit the form to? E.g. Staff name, address and contact.		
How to submit the form?		
(a) Electronic form via charity's website (to also include the website address).	(b) Email (to include the name of contact person, telephone number, handphone number and email address).	(c) Mail (to include the name of contact person, telephone number, handphone number and email address).