

# LEADING HEALTHCARE

The newsletter of the Healthcare Leadership College



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Of late, my thoughts have been returning to a Chinese poem that I first learnt in secondary school more than 20 years ago. The poem is by the renowned Tang Dynasty poet Bai Ju Yi (白居易) and is titled "Farewell on the Grasslands". The first four lines of the poem are the most memorable:

离离原上草  
一岁一枯荣  
野火烧不尽  
春风吹又生

Translated, these lines read: *"The lush grass on the plains, flourish and wither each year. The wildfires cannot burn the grass away, and it lives again when the spring wind blows."*

Perhaps the reason why I keep on thinking of this poem is because these lines capture the essence of resilience and hope so well. Resilience and hope are precisely what we need to hold on to in the current times, as Singapore and the world move towards a new normal.

A/Prof Lita Chew's sharing in this issue reminds us that life is a journey, through good times and bad, while our HLC colleague shares how hope kept her going during the dark days when both of her parents fell seriously ill from COVID-19. And it is useful to remember that even in the midst of crisis, there are opportunities - HLC innovated and transformed our programmes to be delivered fully online, an endeavour that we are all very proud of.

Let us all look towards the day when the spring winds blow again.

# Dean's Message

## Leadership is About Doing The Right Thing

Peter Drucker was the management guru of the 20th century.

Born in Vienna, Austria, in 1909, he lived till 2005. He went to university in Germany in the early 1930s, where he vocally opposed the Nazis' ascent to power. He escaped to England in 1933, and to the United States in 1937. In 1939, he published his first book, *The End of Economic Man: The Origins of Totalitarianism*, which chronicled the rise of fascism.

Peter Drucker's principles of management and leadership influenced many companies and helped them to succeed. The key to most of them was cutting to the heart of the matter. This quote is particularly apt for our society - "Management is doing things right; leadership is doing the right things."

When I was quite junior, I remembered working with a well-established leader on a committee. She told me that her aim was to cross the 'T's and dot the 'I's and made sure that anything that she or her committee did could not be criticized. It was a very defensive posture and as a result we did not achieve very much for the people whom we were supposed to serve.

Too often, we can see people even at senior levels taking refuge in doing things right but not having the courage to do the right thing. It is a much safer approach. After their rotation is over, they can move on but nothing has changed. In contrast, those that seek to do the right things are guided by principles that form their inner compass, giving them the confidence to venture into the unknown for the good of the organization. They take risks.

This brings us to another Peter Drucker principle of leadership, "People who don't take risks generally make about two big mistakes a year. People who do take risks generally make about two big mistakes a year."

People who don't take the right risks are taking a big risk.

In healthcare it is more prudent to call risk change, the intent and necessity are the same. It takes courage to depart from the safety of what has worked successfully in the past. Change need not be grand and sweeping. We can all make small changes for the better, in whatever position we hold. And occasionally, small changes can add up to become a major transformation.

Leaders need to do the right thing and have the courage to make changes.



**Professor Aymeric Lim**

*Dean, Healthcare Leadership College  
Group Chairman, Medical Board  
National University Health System  
Senior Consultant, Department of  
Hand & Reconstructive Microsurgery,  
National University Hospital  
Professor, Department of Orthopaedic  
Surgery, Yong Loo Lin School of Medi-  
cine*



**A/Prof Lita Chew**

Group Director, Allied Health,  
SingHealth

Head of Pharmacy, National Cancer  
Centre Singapore

**Life is a journey. My education changed me and made me want to do more things. I benefited greatly and wanted to give back.**

# Letter to our Young Leaders

## A Journey through Life

A/Prof Lita Chew was the Chief Pharmacist from 1 Apr 2011 to 1 Jan 2020. In her 8 years at MOH, A/Prof Lita made many significant contributions to the pharmacist profession and practice. She led the establishment of local pharmacy residency training capabilities, development of advanced practice competency frameworks and centralised pharmacist pre-registration training models. She also steered the development of a national pharmacy strategy to enhance the delivery of pharmaceutical care to support wider healthcare transformation efforts in Singapore. She is currently serving concurrent appointments at SingHealth as Group Director, Allied Health, at National University of Singapore as a teaching faculty member, as well as Head of Pharmacy at National Cancer Centre Singapore.

A/Prof Lita is a mother of 4 teenagers (15, 17, 18 & 19 years old). She enjoys gastronomic fun, as well as conquering mountains.

## Dear Young Leaders,

To me, life is a journey. My life journey brought me to study Pharmacy at National University of Singapore. My mother chose Pharmacy for me. It was not my choice, but my parents' choice. My education changed me and made me want to do more things. I benefited greatly and wanted to give back.

### Being Adaptable

In my leadership journey, someone I much respected taught me this, "We are all humans, at some point in time, human touch is essential." We need to always keep the human touch as we provide care through technology. As leaders, it is crucial not to lose the human touch, technology is to augment the work we do. We have to adapt and make ourselves dispensable, not indispensable. Future in healthcare is about technology and working with information. We have to work smarter and be adaptable.

Problems such as manpower issue will always be there. It will likely worsen in future. We have to adapt, and have a change in mindset. Look at things from a positive perspective: instead of lamenting that the glass is half-empty, let's think of it as a half-full glass, and focus our energies on finding ways to solve those issues and optimize the limited resources.

### Focus on What Matters

I have four kids, in their teens. Imagine, I sat for the PSLE five times! My family comes first. In my younger years I worked three shifts – but I managed my time and made sure I was there for my family when they needed me. Sometimes, I am asked this question: Do you check emails while on leave? The simple answer is that I cannot afford not to, and this is true of many of us. In the day, we have no time to answer emails. At night, when all's done, we can finally check emails. I answer my emails anytime, anywhere. I told my staff they do not have to reply. It is just my

working schedule. I try not to reply on weekends, unless it is urgent.

Many of us have limited time, and many demands on that time, both work and personal. How can we manage while still taking care of ourselves? We need to prioritize. You must know what is most important to you and prioritize, plan and act accordingly. In my case, I am disciplined and detailed - I plan out my schedule, including time with my kids. That is how I balance and keep a sane mind! Believe in yourself, you can and you will.

### **“Ithaka”: A Journey of Adventure and Discovery**

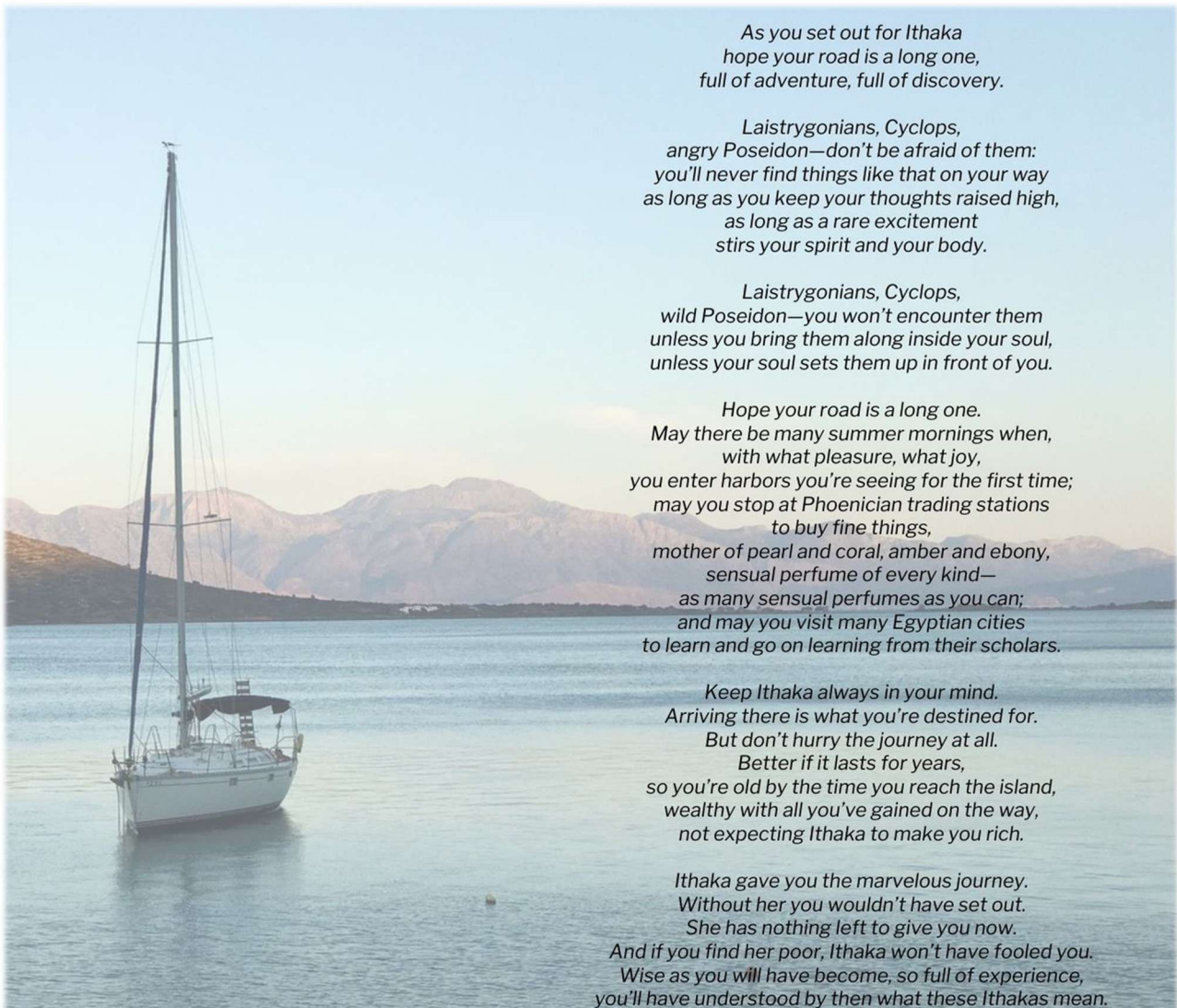
My professional journey has been like the poem *“Ithaka”*, by the Greek poet Constantine Cavafy. What matters is that you enjoy the journey and scenery, and you will find that the entire journey is very meaningful.

I did not do fantastically well in Pharmacy. I went on to pursue oncology pharmacy at the Singapore General Hospital. That is what I discovered I loved and what I am still doing today. My oncology journey took me to a higher career.

How did I end up in NUS and MOH? Often, if you are clear of your purpose and contribute sincerely, people will come to know about it and can see you truly for what you are. All my life I had only applied for one job. I know who I am and I know what I want to do. In this one job, I was offered various positions and jobs. Whatever came first, I would take. My first boss told me, they needed a cover at oncology and few would take it up as it deals with toxic and hazardous drugs.

My inquisitive nature and desire to solve problems brought me to places. Similarly, how I read pharmacy, how I got my first job and how I ended up with many portfolios, it all seemed like serendipity. The reality is that people can see you for what you are and opportunities will come your way.

Enjoy the journey to your own Ithakas. Keep your goal in your heart but **remember that it is the journey that matters, and you will find that you have gained immeasurable riches of experience, wisdom, and friends along the way.**



As you set out for Ithaka  
hope your road is a long one,  
full of adventure, full of discovery.

Laistrygonians, Cyclops,  
angry Poseidon—don't be afraid of them:  
you'll never find things like that on your way  
as long as you keep your thoughts raised high,  
as long as a rare excitement  
stirs your spirit and your body.

Laistrygonians, Cyclops,  
wild Poseidon—you won't encounter them  
unless you bring them along inside your soul,  
unless your soul sets them up in front of you.

Hope your road is a long one.  
May there be many summer mornings when,  
with what pleasure, what joy,  
you enter harbors you're seeing for the first time;  
may you stop at Phoenician trading stations  
to buy fine things,  
mother of pearl and coral, amber and ebony,  
sensual perfume of every kind—  
as many sensual perfumes as you can;  
and may you visit many Egyptian cities  
to learn and go on learning from their scholars.

Keep Ithaka always in your mind.  
Arriving there is what you're destined for.  
But don't hurry the journey at all.  
Better if it lasts for years,  
so you're old by the time you reach the island,  
wealthy with all you've gained on the way,  
not expecting Ithaka to make you rich.

Ithaka gave you the marvelous journey.  
Without her you wouldn't have set out.  
She has nothing left to give you now.  
And if you find her poor, Ithaka won't have fooled you.  
Wise as you will have become, so full of experience,  
you'll have understood by then what these Ithakas mean.

# INTRODUCING HLC's First Inaugural Online Programme

Rising to the current challenges, HLC went digital in our quest to bring our healthcare leaders together and the first milestone programme to go fully online was the 20<sup>th</sup> New Leaders Programme (NLP) in July 2020.

NLP is HLC's foundational leadership programme for first time team leaders. It is a key leadership milestone programme for the participants to network and gain a better understanding of Singapore's healthcare landscape and governance context, key healthcare policy areas and dialogue with our senior healthcare leaders.

HLC's first online NLP run brought 33 participants from the various clusters, healthcare agencies and community care partners together - it was a time of sharing, of reflection, of supporting each other in shared difficulties. The programme ended on a hopeful note of looking ahead to the future, that they would have the opportunity to meet and get to know each other better.

## A glimpse at the online New Leaders Programme (NLP)



Gaining knowledge, e-meeting, chatting and lively exchanges of ideas/discussions on HLC's online learning platform - Wix before the the 20<sup>th</sup> NLP webinar sessions on 7-9 Jul.



Getting other groups to guess my group's code word.



Having fun, playing charades together during the ice breaker at the pre-session.



Although we are not sitting alongside with each another, we can still encourage one another virtually.

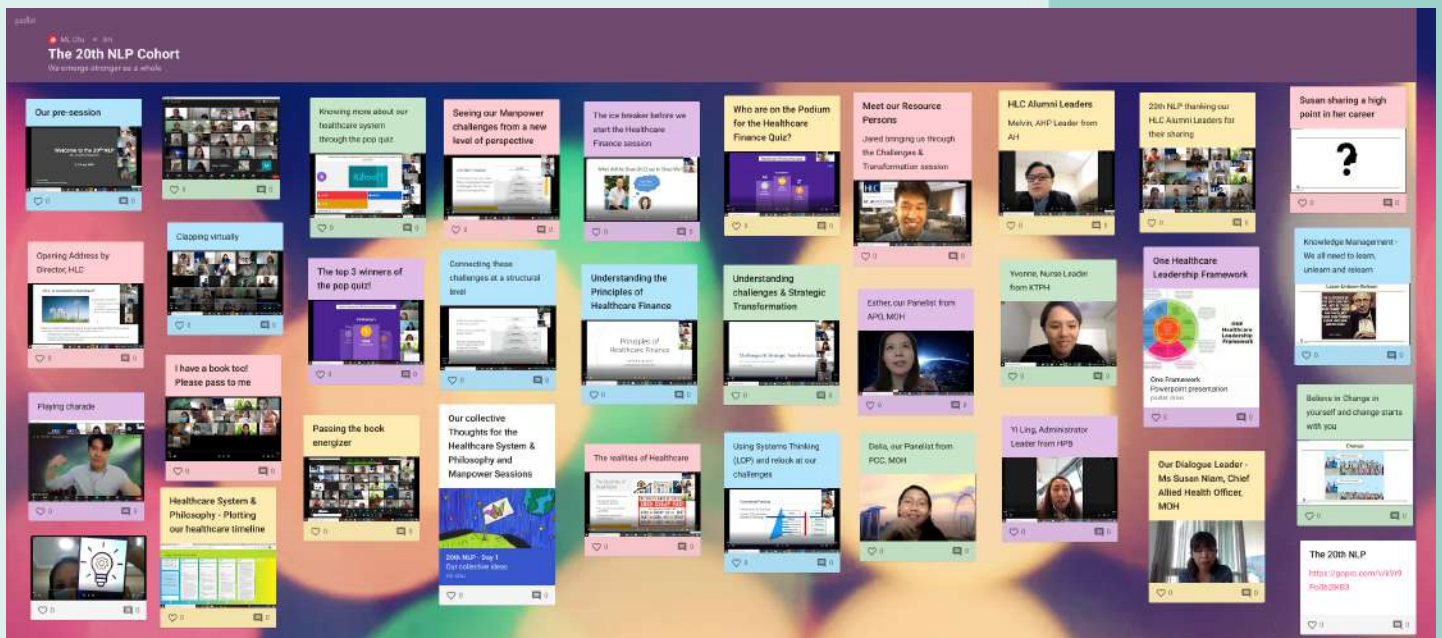
Paradigm shift – using Systems Thinking to look at our Manpower challenges from a new level of perspective.



Learning more about our Healthcare Finance System through Kahoot quiz.

Meet our Panelists in the Challenges and Strategic Transformation session (from left to right) -  
 Ms Esther Soon, Deputy Director, Ageing Planning Office, MOH and Ms Delia Teo, Deputy Director, Primary and Community Care Division, MOH



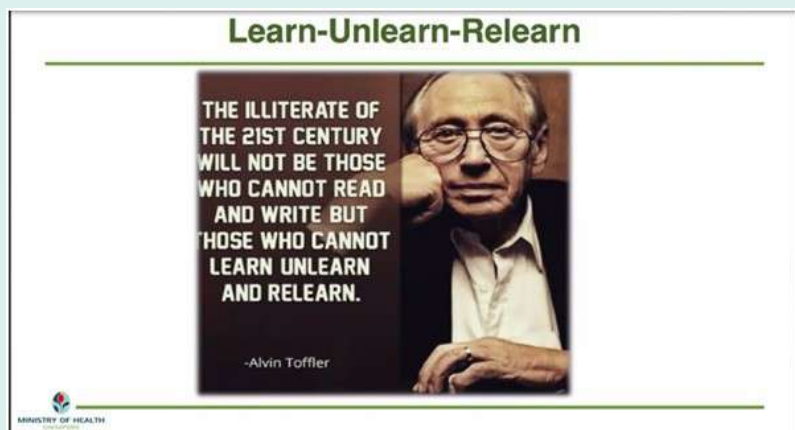


Putting together what we learned from the 3 days webinar sessions.



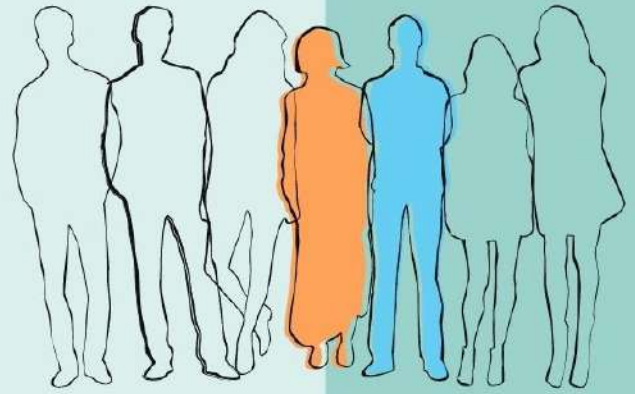
This is how we “clapped” virtually. Thanking HLC Alumni leaders – Mr Melvin Poon (Head, AH), Ms Lee Yi Ling (Assistant Director, HPB) and Ms Yvonne Yap (Nurse Manager, KTPH) for sharing their leadership perspectives.

Chatting with our senior healthcare leader Ms Susan Niam, Chief Allied Health Officer, MOH who candidly shared how an early mistake she made, eventually became the critical turning point in her career.



Ms Susan Niam shared the most useful learning during her career – to be able to learn, unlearn and relearn.

# Appreciation from the 20th NLP Cohort



A Big thank you to the HLC Team for putting this together! And thanks to all the participants and speakers. It has been an insightful 3 days for me :) Take care and stay safe all.

I think it's really heartfelt gratitude to HLC for the hard work to create a platform for leaders in healthcare to come together to "learn, unlearn, relearn" and to develop support from one another. It's a valuable course that will stay with us for life.

Thank you HLC Team, and everyone in the 20th NLP. Really enjoyed the course and learning from everyone. Just a thought, maybe, we have a refresher/follow-up (where we get to meet physically) after Covid-19?

Thanks for the hard work Team HLC(=) able to make something so amazing even in the midst of a pandemic~ good job!!



# HOPE AND GRATITUDE:

## My Family's Covid-19 Story

In early March this year, our HLC colleague, Jennie, went through a harrowing time as both her parents contracted COVID-19 and became seriously ill. Thankfully, her parents recovered and are now recuperating well. This is Jennie's recounting of her family's emotional journey.

### Parents Tested Positive for Covid

My parents are recovered Covid-19 patients. Both had attended a CNY dinner celebration at Safra Jurong. Dad started to have body ache 7 days after the dinner. He visited the family GP multiple times, and was diagnosed with mild flu initially before being tested positive for dengue fever 15 days after that dinner. But his condition grew steadily worse despite the medications. In an unexpected twist, despite the initial positive dengue test, it turned out that Dad did not have dengue fever after all.

18 days after the dinner, Dad decided to seek help at the A&E department of Ng Teng Fong General Hospital. He was hospitalised immediately and sent to the ICU as his condition was already very serious. The doctors there suspected that he had contracted Covid-19 but 2 swabs came back negative. On the other hand, Mum did not have any flu symptoms but only had backache. On the same night of Dad's hospital admission, a MOH contact tracing personnel called Mum and informed her that a Covid-19 positive patient had attended the same Safra Jurong dinner as her. She quickly told them that Dad had been admitted and hence was asked to admit herself too after they called Dad's doctor at NTFGH. Both my Mum and Dad were admitted into the hospital on 4 Mar 2020 and were diagnosed as Covid-19 positive on 6 Mar 2020 – the positive result for my Dad coming only after tests were done on fluid drawn from his lungs.

We had no idea then that this would be the start of long hospital stays for both Mum and Dad, that they would both be on ventilator support in the ICU for weeks, and a hugely emotional roller-coaster ride for our family.

### Quarantine for sister's and my family

Meanwhile, as both my sister and my family had met up with our parents after they were ill, we were contacted by NTFGH's tracing team and asked several questions: when did we last meet our parents, where did we meet them, who else was there. We were told that they would submit the details to MOH and someone from the Contact Tracing Unit would call us. In the meantime, we should quarantine ourselves.

On 6 Mar 2020, the same day that our parents were confirmed as Covid-19 positive, a Cisco officer and a HPB staff came and served us with Quarantine Orders (QO). We were provided with the QO, a temperature recording paper, a disposable mask and a digital thermometer. Shortly after they left, we received a call from MOH. They reminded us to take our temperature 3 times a day and told us that someone will call 3 times daily to get our temperature. We were also told to show them 3 different areas of our home with us inside so that they could have a record when they next called us. It seemed strange as we did not fully understand the

rationale, but we complied. For the remaining days of our QO, we received whatsapp video calls from someone calling on behalf of MOH (a contracted QO agent). We would be asked our temperature and if we were feeling alright, while looking into the handphone camera. Each of our family members had to answer the questions personally as the QO agent wanted to see all our faces to ensure that we were indeed at home. In the meantime, my company HR also called to inform that they too needed 2 readings of my temperature daily. With all these constant reminders and requests to check on our status, we started to worry if we were incubating the disease and had unwittingly passed it to our colleagues and friends.

As I have asthma, the constant stress and anxiety had a negative effect on me and I had difficulty breathing almost throughout my quarantine period. As breathlessness is also one of the Covid-19 symptoms, MOH sent me to get tested at NCID twice within my quarantine period.

On my first visit to NCID, my husband was also down with a sore throat and mild cough so we were both picked up by an ambulance staff in full PPE at our door and we were transported to NCID by an ambulance (with siren) alongside a police motorcycle escort (with siren too). I used to pray for whoever was inside the ambulance whenever I heard the ambulance siren. This time, I prayed for my family and myself. At the NCID, the nurse performed the swab test on us and we were sent to do ECGs and chest x-rays. I was later sent home while my husband had to be admitted and further tested. He was discharged only 3 days later after multiple swabs and blood tests had cleared him. He shared that the hospital stay was uncomfortable as the ward was too cold and food was bland, not to mention the various tests that had to be done. We started to imagine what my parents must have been going through.

The Quarantine days were dark and gloomy, as besides my constant breathlessness and anxiety, we were sick with worry for our parents, for fear that they would not make it. Every time our phone rang (which it did on what seemed like a constant basis, from QO officers, relatives, friends, colleagues), our hearts beat so fast, for fear of any bad news.

### Parents' Condition

The doctors and nurses at NTFGH really worked beyond the call of duty. The doctor called to provide updates on both my parents' condition almost every day. Dad was in ICU for 31 days, and Mum for 15 days. Both had to be in prone position while in ICU. As dad had problem winding down the ventilator after being on it for more than 14 days, doctors had to perform a Tracheostomy procedure on him. Luckily for Mum, she could wind off the ventilator before the 14 days were up so she didn't have to do Tracheostomy.

The day when Mum was transferred out of the ICU, the nurse pushed her in a wheelchair and en route, stopped outside Dad's ICU room to take a look at him. They managed to wave to each other.

While in the normal ward, mum started her Physiotherapy sessions. The therapist gave her a lot of push and encouragement. They told her that dad would be out of the ICU soon and she could show him that she had recovered well and he could do it too. As Mum is someone who hates staying in the hospital, not to mention in an individual room with minimal contact with doctors and nurses, she worked really hard on the exercises that the therapist had taught her. As we were not allowed to visit them, we



Photo: The Straits Times

would make whatsapp video calls to Mum daily. In our conversations, we assured her that Dad's condition was improving and talked about her favourite foods, and what she looked forward to eating after her discharge. Mum was discharged on 14 Apr.

On the other hand, Dad spent more days in ICU and was finally transferred to the high dependency ward. One of our programme alumnus, who is an ICU nurse in A&E, helped to keep a lookout for my parents and suggested that I get a music player for my music lover dad. The nurses helped to set up the music player in his ward so his favourite tunes could relax and accompany him during these dark days.

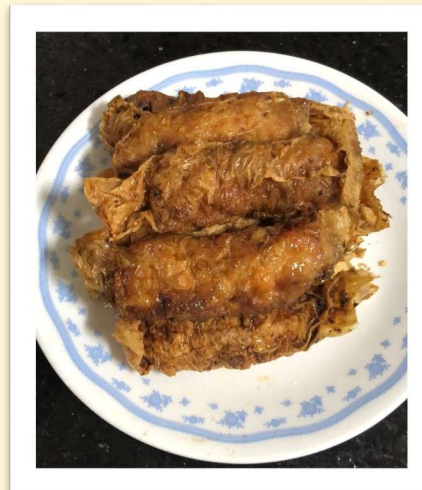
After what seemed like an eternity, we were finally able to have whatsapp video calls with Dad. But due to his tracheostomy tube and weak limbs, he was unable to speak and we could only communicate through a nurse. The nurses also helped Dad to take short videos as he went through the physiotherapy sessions. The videos were later sent to us by Dad and we could see how the nurses engaged and encouraged him. There was also one video, where Dad took when the nurses pushed him out to the garden in NTFGH. All the videos brought me happy tears, to see him slowly recovering with the support of the caring staff in NTFGH. Dad was finally discharged on 23 Apr, 50 days after he was admitted to the hospital on 4 March.

### **Thankful**

Our family will never forget this episode in our lives, that we nearly lost both parents to Covid-19. Our most heartfelt thanks to those who were and continue to be, involved in caring for my parents. You are the reason why they survived Covid-19 and are still with us today. Also a big thank you to all healthcare personnel, for your courage and selflessness through this all.



*Food cooked by Jennie's mother after her recovery*



# Quiz Answers & Winners

Answers to June Issue's Quiz are as follows:

1

**Which fish operates in the hospital?**

Answer: Surgeonfish / Sturgeon

2

**Name 3 leaders who have spoken at HLC's Distinguished Speaker Series (DSS).**

Answer: Dr Atul Gawande / Mr Lim Siong Guan / Mr Philip Yeo / Dr Noeleen Heyzer



**The 4 lucky winners who each won a special handmade soap by HLC are:**

- 1) Mr Clement Tan, IMH
- 2) Ms Esther Ho, ALPS
- 3) Dr. Isaac Sia, NUH
- 4) Mr Jason Aw, MOHH

## About the Healthcare Leadership College



The Healthcare Leadership College (HLC), a division of MOH Holdings, supports the building of strong leadership capacity and capabilities for our national healthcare system, in line with the Ministry of Health's vision and strategic priorities. We develop and deliver high quality programmes and other learning platforms for public healthcare leaders, covering topics such as leadership and organisational development, public service ethos and values, and key healthcare policies and issues. Find out more here: [www.hlc.mohh.com.sg](http://www.hlc.mohh.com.sg)

### Leading Healthcare Team

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#### Dean

**Professor Aymeric Lim**  
Dean, HLC

#### Advisors

**Ms Lee Shiao Wei**  
Director, HLC

**Mr Dennis Loh**  
Deputy Director, HLC

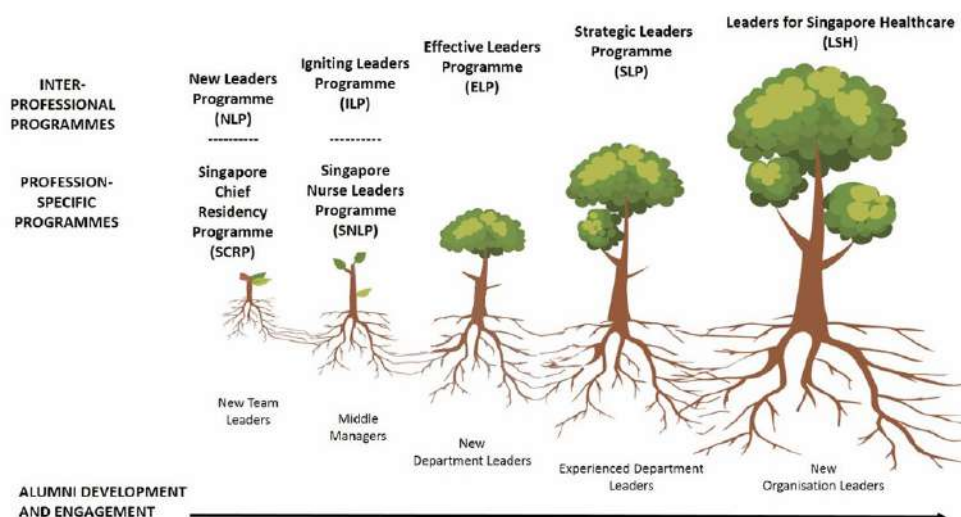
**Ms Pacillia Ng**  
Senior Assistant Director, HLC

#### Editors

**Ms Carol Tang**  
Assistant Manager, HLC

**Ms Reina Goh**  
Executive, HLC

# Leadership Milestone Programmes (Cross-Profession)



- Foster a **one healthcare family** mindset
- Build **shared values and ethos** amongst public healthcare leaders
- Develop understanding of **key healthcare policies**, the rationale and principles behind the policies
- Strengthen **leadership capabilities** of healthcare leaders to enable change and drive strategies to transform healthcare delivery
- Nurture a **community** of healthcare leaders across professions and across the healthcare family and professions

## New Leaders Programme (NLP)

### PROGRAMME SYNOPSIS



The NLP supports the development of high potential first time team leaders in the healthcare family.

The transition from being an individual contributor to leading a team is a significant and challenging milestone. The NLP encourages participants to explore their new role: How does the Singapore healthcare system work? What is my role in the larger healthcare system? What does it mean to lead? What does it mean to lead in the healthcare family?

The NLP also provides opportunities for participants to network across healthcare institutions and professions.

**Programme Manager: Ms Chu Min Lian  
Ms Goh You Li**

## Igniting Leaders Programme (ILP)

### PROGRAMME SYNOPSIS

The Igniting Leaders Programme (ILP) aims to strengthen participants' systems perspectives by providing opportunities for them to examine our healthcare philosophy and policy choices, and understand our larger strategic goals and priorities. This also helps participants understand one another's role in the healthcare system.

The ILP will enable participants to gain insight into their own leadership practice, especially in building their teams, and allows them to re-ignite their sense of purpose in healthcare. The ILP will also be an important platform for participants to foster peer support networks across healthcare institutions and professions.

**Programme Manager: Ms Carol Tang**



## Effective Leaders Programme (ELP)



### PROGRAMME SYNOPSIS

The ELP is designed to deepen participants' understanding of the healthcare system – its complexity and strategic direction, and widen their perspectives beyond the professional and institutional viewpoints.

The ELP also supports participants in reflecting on their personal leadership practice, and focus on driving change and building teams with a collective mission.

The programme emphasises the building of shared experiences and perspectives among participants, and fosters a trusted peer support community for mutual support and collaboration.

**Programme Manager: Mr Jared Koh**

## Strategic Leaders Programme (SLP)

### PROGRAMME SYNOPSIS

The SLP will support our senior leaders to adopt a one healthcare mindset, and appreciate the importance of a whole of system approach that include perspectives beyond healthcare.

Participants will have the opportunity to reflect on their collective leadership and collaborative practice as they lead larger and more diverse teams within and across healthcare institutions.

The SLP is also designed for participants to deepen networks and relationships among their peers to strengthen collaboration in the healthcare family.



**Programme Manager: Ms Chu Min Lian**

## Leaders for Singapore Healthcare (LSH)



### PROGRAMME SYNOPSIS

The Leaders for Singapore Healthcare (LSH) is HLC's new signature programme for senior healthcare leaders with organisational level responsibilities.

As senior healthcare leaders, participants will examine their roles as leaders of and for the Singapore health eco-system, with a larger influence across institutions and clusters, and beyond public healthcare.

The programme is conducted over four months, in four segments, and includes a study trip.

**Programme Manager: Ms Angie Chang**

**\*Please contact respective managers for more information.**

## Profession-Specific Milestone Programmes

### Singapore Chief Residency Programme SCRP



#### PROGRAMME SYNOPSIS

Singapore's healthcare landscape is evolving rapidly with new delivery systems, policies, and educational structures. In this time of transformation, effective physician leadership is essential, and the Singapore Chief Residency Programme (SCRCP) prepares tomorrow's doctors to meet these challenges, promote excellence in the medical education, and advance Singapore's Public Healthcare System.

**Programme Manager: Mr Alfred Cheong**

### Singapore Nurse Leaders Programme (SNLP)

#### PROGRAMME SYNOPSIS

The Singapore Nurse Leaders Programme (SNLP) is developed as part of the Future Nursing Career Review Committee's (FNCRC) recommendation to equip future nursing leaders with prior experience in community care before progressing to take on higher leadership positions.

With an increasingly system-level approach towards nursing at the RHS-level, the programme is designed to equip nurses with the necessary knowledge and skills to lead care across multiple facilities- acute and community sectors. The SNLP aims to groom level 2 nurse leaders to be change agents with strong leadership and policy perspectives, and this is achieved via a 2-prong approach, in-person seminars and attachment to the community care sector.



**Programme Manager: Ms Goh You Li**

## Alumni Events

The College also hosts events and talks for alumni of its milestone programmes, such as fireside chats with senior healthcare leaders, policy workshops, and learning journeys. Alumni events are open by invitation only, and most fees are fully subsidised by the Healthcare Leadership College.

**Programme Manager: Ms Carol Tang  
Ms Nicole Lee**

**\*Please contact respective managers for more information.**





A DIVISION OF  
**MOH HOLDINGS**

A thin, grey, curved line that arches over the text "MOH HOLDINGS".