

LEADING HEALTHCARE

The newsletter of the Healthcare Leadership College

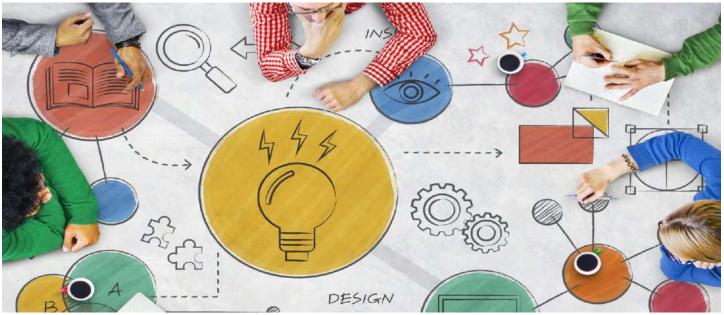


Image: Freepik.com

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After a long and draining year, all of us are glad to head into 2021, a year in which we hope we can see the light at the end of the tunnel. Even as 2020 had many low points, it was also a year in which we saw tremendous sparks of collaboration, innovation, generosity and courage. In this first issue of 2021, we celebrate the spirit of innovation and the drive to embrace change. Camilla Wong, Chief Pharmacist, shares about the importance of embracing change and staying relevant; our 7th Singapore Chief Resident Programme (SCRP) participants showcase their group project; and we see that even the humble umbrella can be reinvented.

We wish every one a better 2021 with this uplifting paean of hope from the Beatles. Here comes the sun!

Here comes the sun Here comes the sun And I say it's alright

Little darling, it's been a long cold lonely winter
Little darling, it seems like years since it's been here
Little darling, the smiles returning to the faces
Little darling, it feels like years since it's been here
Little darling, I feel that ice is slowly melting
Little darling, it seems like years since it's been clear

Here comes the sun Here comes the sun And I say it's alright

Sun, sun, sun, Here it comes!



Dean's Message

INNOVATING OUR FUTURE

COVID has catalysed the digital transformation of our lives. Many of the changes that we have made will become permanent. People will work from home, they will shop online, and they will seek entertainment digitally. "Zooming" has now become a verb.

In healthcare, however, the same major challenges remain: the implications of an ageing population; mental health concerns; rising costs. In America, spending on healthcare will soon reach 20% of GDP. In Singapore, our healthcare costs continue to rise. The only way to address these critical healthcare issues in a sustainable way is through innovation. As Dr Daniel Kraft at Medicine for Singularity University puts it, we need disruptive change and not incremental improvements in small compartmentalized silos.

Can we re-imagine what healthcare will look like in the future? How can we ride on the momentum created by COVID to hasten the speed of transformation? What role will digital technologies play in enabling transformation? And most importantly, can we change our behaviours and culture to unleash the benefit of the innovations?

We already have innovations that seek to transform the way we see and deliver healthcare. The SingHealth Polyclinics virtual reality initiative¹ uses VR tools, for child vaccinations and elderly cognitive assessment. BotMD is an app based on a natural language processing artificial intelligence which enables healthcare professionals to find relevant information instantly². This includes chemotherapy cost calculators, paediatric drug dosing calculators and financial information. NUHS clinicians collaborated with BotMD to build a cheap, scalable vital signs monitoring solution which was deployed in the dormitories during the COVID pandemic to safely monitor migrant workers' health. And there are some systems that combine screening, monitoring and interventions that lead to behavioural change and improved health outcomes in chronic conditions. One such platform is NOVI health³.

The lifeblood of the industrial revolution 2 centuries ago was the exponential expansion of usable energy. The lifeblood of the digital revolution is the exponential expansion of usable data. Bold innovations riding on this potential will be key to creating a sustainable future for our healthcare system.



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Dr Camilla Wong
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Take the COVID-19 pandemic which struck us suddenly. No one received training on how to manage this crisis and respond to it. And yet all of us rose to the occasion to bring the pandemic under control in Singapore. This has demonstrated just how important it is to be nimble in picking up skills quickly, knowing where to source for timely information and embracing changes.

Letter to our Young Leaders

Dr Camilla Wong

Dr Camilla Wong has 25 years of experience in health and is currently Director, Allied Health, Sengkang General Hospital (SKH) and Chief Pharmacist at the Ministry of Health (MOH).

At SKH, Dr Wong has been integral in the planning of the infrastructure, processes and services not only for Allied Health services but the hospital as a whole. She is a member of a number of SKH committees including the Medical Board and IT Steering Committee, and as part of the SKH Senior Management team, serves as a catalyst for collaborative partnerships between the various departments and SKH stakeholders. As Chief Pharmacist, MOH, Dr Wong oversees the National Pharmacy Strategy which spans over 19 initiatives, encompassing pharmaceutical care excellence, developing a confident pharmacy workforce, re-designing the supply chain, and information and technology enablement.

Dr Wong has played an integral role in the development of career pathways and competency frameworks for the pharmacists and Allied Health professionals both cluster-wide and nationally. She has been a role model and mentor to pharmacists and other healthcare professionals, with many helming leadership and headship positions.

Dear Young Leaders,

Taking up a leadership position is not an easy task with the journey being like a roller coaster ride. There is no one-size-fits-all solution to becoming a good leader, but here are some lessons I have found useful in my own leadership journey.

Communication is Key

Looking back on my earlier days as a young leader, I think the hardest part of the job is people management. As a young leader, managing your subordinates is hard but managing your peers and seniors is even tougher. As people have different priorities at different stages of their life, it is essential to engage them and understand their views, and ultimately forge good working relationships. This requires communication that helps build relationships, otherwise known as relationship-based communication.

Good communication does not just mean verbal communication, it also includes nonverbal communication and importantly, listening. I have learnt that body language and the way you portray yourself when speaking is crucial. I have also come to realise that people will respect and trust you, if you are genuine, have the right motivations, and articulate your intent honestly and clearly. I started practicing all these early in my career and continue to try to perfect them with time. I am very fortunate that the people I work with now, believe in and trust me to lead them through genuine honesty in my words and actions.



Embracing Change

Next, learn to anticipate change, accept change, and embrace change. I know many of us, myself included, find adjusting to change difficult or even painful. Some may even ask why they cannot keep on doing things the same way, when these ways have worked well in the past.

Let me share my personal experience. In the past, pharmacists, like me, would carry our "encyclopedia of Drugs" in our hands and walk around like "Drug Lords". Whenever doctors or nurses asked us about an unfamiliar drug, we would flip through the book rapidly and find the information – it was such a position of power to have access to information! I also had another forte – counting pills swiftly. I like to believe that I was one of the fastest pill counters in the department then. Now of course, both skills are obsolete. With the advent of the internet and drug monograph apps, all anyone needs to do is to type the drug name into Google or the app, and all the relevant

information will appear. Robotic systems now count, sort and package the medications much more rapidly and with much fewer errors than humans did. If these were the only skills I possessed, I would be out of a job now.

The lesson here is that all of us have to be agile and be amenable to change. As healthcare professionals, we have a duty to constantly seek new ways to add value to the healthcare system and to our patients.

As the pace of change accelerates, it is impossible to depend on formal lessons to learn everything, so just-in -time learning is more crucial than ever. Take the COVID-19 pandemic which struck us suddenly. No one received training on how to manage this crisis and respond to it. And yet all of us rose to the occasion to bring the pandemic under control in Singapore. This has demonstrated just how important it is to be nimble in picking up skills quickly, knowing where to source for timely information and embracing changes.



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Learning to Lead

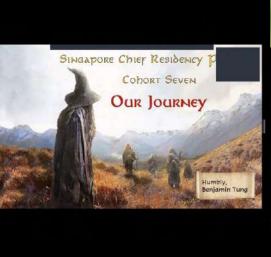
As you rise in your career, you will face increased responsibilities and workload. I would advise all young leaders to identify their priorities and focus their time and effort on the most important areas which need their attention. Don't feel compelled to take on every single task yourself – you may end up becoming a jack of all trades but a master of none.

Another way to manage your workload is to delegate your work. By doing so, you can free yourself up to focus on larger responsibilities while developing your staff to take on more, aiding them to grow their competencies and leadership skills. The "Pygmalion effect" states that higher expectations lead to improved performance in a given area, that is, a person rises when there is an increase in demand of the situation. Hence, as a leader you should seek to develop both yourself and your staff.

Last but not least, the most important trait of a leader is to always be humble and follow your moral compass. In your leadership journey, you will face many challenges and the right decision may not always be obvious or may require you to make difficult tradeoffs. If you know who you are as a leader and what you stand for, you will always make the best decisions for yourself and for your team.

I wish you all a fulfilling leadership journey.







The 7th SCRP: The Vanguard of Change

Covid-19 posed a huge disruption to HLC's programmes, which were previously held fully in-person but had to pivot to the online mode rapidly. The 7^{th} Singapore Chief Residency Programme (SCRP), as a national programme that spanned a one-year timeframe, with leadership seminars and dialogues scheduled every month, was the programme that saw the greatest number of changes. The 7^{th} SCRP thus became the vanguard for HLC's online transformation efforts.

Alfred Cheong, SCRP Programme Manager, shares his one-year whirlwind change journey.

SCRP Cohort 7 got off to a great start in the last quarter of 2019: starting with intensive discussion on leadership personalities and behaviours, followed by a two-day-one-night seminar that culminated in a 3-hour long team challenge climb on a 8-storey tall tower.

The last in-person seminar for SCRP Cohort 7 was held in November 2019. I remember wishing the Chief Residents an early Christmas and Happy New Year before meeting them in February 2020. Who would ever imagine what was to come in the following months? It was then where SCRP welcomed the many first times in the way we run our programme.

In early February 2020, my bosses told me that they had decided to postpone the February seminar and a leadership dialogue dinner. Then March came, and the March seminar was also postponed. With every decision to cancel each seminar, I thought, "Surely this is the last cancellation before we can resume proper, right?"

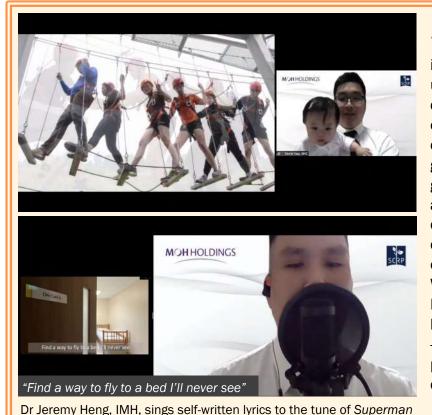
By April 2020, it was increasingly clear that Covid-19 would be here to stay for some time, and my bosses felt that we could not keep postponing or canceling the programmes. As much as we felt that face-to-face interactions were important and were unsure if online programmes would work, it was time to eat our own medicine and try out something new and unfamiliar.

The Singapore Chief Residency
Programme (SCRP) is a one-year
national programme that aims to
equip Chief Residents with
leadership, teaching, management
and policy competencies while
inspiring a public service ethos and
camaraderie that transcends the
healthcare clusters. The SCRP is
targeted at Chief Residents who have
the potential to assume key
leadership roles within their
organisations.

In April 2020, HLC held our first ever SCRP webinar on Zoom. The original curriculum was jettisoned in favour of a webinar focusing on Collaborative Leadership and Emotional Well-being, as we thought this would be a good opportunity to get in touch with the SCRP participants to find out how they were coping. This turned out to be the right decision as the Chief Residents were eager to connect and offer each other moral support.

Having gained confidence with the online platform, we pressed ahead, and in May 2020, invited the College of

Clinician Educators (CCE) to deliver a fruitful 2 half days webinar on "Teaching, Learning & Leading". COVID-19 also inspired the Chief Residents to pivot their projects by working on COVID-related topics close to their heart, such as improving transfer of care for our Migrant Workers with COVID-19 and building resilience amongst healthcare workers during the COVID-19 pandemic. The restrictions on cross-institutional interactions resulted in the participants creatively tapping on alternative platforms such as House Party, Zoom, and Google Hangout to discuss their projects.



(It's Not Easy) during the graduation ceremony.

The 7th SCRP graduation took place in December 2020. Given the uncertainties in outlook during the last quarter of 2020 (vaccines were not even a reality at that point!), HLC decided to run it as a webinar graduation. Not having done online graduation events before, the HLC team and SCRP Organising Committee had to carry out fresh thinking on how to organize the programme flow, guest engagement and project presentations. We thank the Guest-Of-Honour DMS Kenneth Mak, senior healthcare leaders, and supervisors for their whole -hearted support of the 7th SCRP participants, despite the challenging circumstances of the year.

It was a tough year, but all of us at HLC learnt valuable lessons from the 7th SCRP change journey. Here are some of the *key lessons* that the HLC team took away:

- **1. Just Do It.** Even when there is huge uncertainty and you do not have all the pieces of information, you can and must still move ahead. HLC decided to resume online and blended programmes as early as possible, to benefit from early experimentation and sense making. If you have any new ideas, just do it! People will appreciate the effort of trying rather than seeking a perfect execution.
- 2. Start Small, Learn Fast, and Scale Quickly. Some people might think it's safer to do less: 多做多错, 少做少错, 不做不错 (the more you do, the more mistakes you make; if you don't do anything, you wouldn't make any mistakes). But when nobody has answers, the only way to move forward is to start as quickly as you can with many small experiments, and not be paralysed by uncertainty. Learn quickly what works, and more importantly, what DOES NOT work, and scale fast. Because the SCRP had seminars every month, it was a wonderful testbed to experiment with online learning. This learning by trial and error did not stop at the SCRP: my fellow HLC team mates adapted and further improved on the learning points for their different programmes.
- **3. Together Everybody Achieves More.** I didn't deliver the SCRP alone. It took the entire HLC team to make this possible. I had very generous colleagues who stepped forward to offer their help, propose ideas, adjust the lesson plans, and more. The HLC team learnt that there is a lot of potential that can be unleashed when we all work together with a strong, shared purpose.



7th SCRP Project:

Prescribing Practices and Medication Wastage in Singapore



About the SCRP Project: As part of the SCRP, participants work on cross cluster group projects with system-level impact. The featured project is the top voted SCRP group project for the 7th SCRP.

"Medication wastage is an important issue and has potential to help with cost savings for patients and the system."

From left to right:

Dr Kennedy Ng, NCCS; Dr Pipetius Quah, NUHS; Dr Huang Mingjie (team leader), NHCS; Dr Ting Fang Ni, NUHS; Dr Andrea Ang, NHG

Our Key Findings

70% of patients with excessive medications

\$47,853 (86 patients)
~\$180 million (300,000 patients)

50% of patients with discontinued medications

\$9,527 (86 patients)
~\$33 million (300,000 patients)

- 7 out of 10 patients had excessive medication supply lasting beyond the next appointment, totalling \$47,853. These represent potential wastage costs as prescriptions may change at the doctor's visit.
- <u>1 in 2 patients</u> were found with discontinued medications, totalling \$9,527. These represent <u>definite wastage costs</u>, as the patients are no longer consuming these medications.
- Extrapolated to 300,000 patients, which is the
 estimated number of Singaporean patients aged 60
 and above with three or more chronic conditions, the
 potential medication wastage costs are \$180 million
 and discontinued medication costs are \$33 million.

How the Study Was Conducted

We interviewed a total of 86 patients at their primary care encounters.

We examined the total cost of medications a patient had, as well as the cost of discontinued medications.

Tzu Chi Singapore

SGH Community Nursing

NUH Carehub

NHG Community Health

patients

98

SGH Pharmacy

NUH Paediatrics

TTSH

Scan the QR code to read the full article:



Turning the Umbrella Upside Down and Inside Out



Image: Kazbrella

There is always a way to do something better! Even the umbrella, with its basic and universal design that has been around for 3000 years.

Do any of you recall your first sight of this strange-looking, inverted umbrella a few years ago? I did – one of my bosses had brought along his umbrella to a HLC programme (see, one can learn new things anywhere, anytime). What first captured my attention was how it could stand on its own on the floor. The second surprise I got was when it opened in the opposite direction from that of a conventional umbrella!

The Kazbrella design and its many imitators are a common sight now, but did you know that it was only recently launched in 2015? Its British inventor, Jenan Kazim, was an aeronautical and offshore engineer who applied his expertise and know-how in mechanics and engineering to re-design the umbrella from scratch. Watch the Kazbrella video, "Under the Canopy" here: https://youtu.be/XeiDwgOa_eg

I was tremendously inspired by the story of the Kazbrella, and how Kazim literally turned the normal umbrella upside down and inside out, and came up with an unexpected and functional design that addresses many of the problems of the conventional umbrella. We can learn many lessons from Kazbrella:

investing passion and focus in our work; always striving for improvement; having a spirit of excitement and experimentation in innovating and trying out new things; and persistence and perseverance to continue trying even in the face of failure.

And if you do not yet have a Kazbrella, try getting one to experience it! Rainy days will never be the same again.



"It is in our nature as human beings to improve things. When I see something wrong in design, I need to find a solution to try and fix it. This faulty umbrella design has been with us for 3,000 years, and we can do better."

Jenan Kazim

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

Leading Healthcare Team

Advisors

Professor Aymeric Lim Dean, HLC

> Ms Lee Shiao Wei Director, HLC

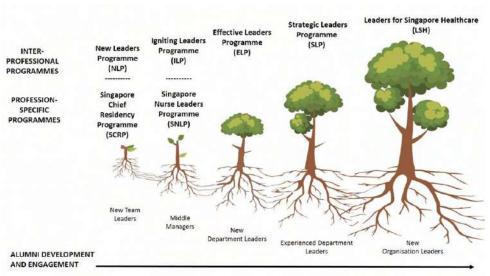
Editorial Team

Mr Dennis Loh Deputy Director, HLC

Ms Pacillia Ng Senior Assistant Director, 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 а community healthcare leaders across professions and across the healthcare family and professions

New Leaders Programme (NLP)



Programme Manager: Ms Chu Min Lian Ms Goh You Li

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.

Igniting Leaders Programme (ILP)

The Igniting Leaders Programme (ILP) aims to strengthen participants' 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)



Mr Jared Koh

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 Programme Manager: among participants, and fosters a trusted peer support community for mutual support and collaboration.

Strategic Leaders Programme (SLP)

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)



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.

Programme Manager: Ms Angie Chang

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

Profession-Specific Milestone Programmes

Singapore Chief Residency Programme (SCRP)



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 (SCRP) 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)

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, programme is designed with the necessary knowledge to equip nurses and skills to lead care across multiple facilities- acute and community sectors. The SNLP aims level 2 nurse leaders to be change agents with 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 Goh You Li

Ms Chu Min Lian Ms Nicole Lee

