

LEADING HEALTHCARE

The newsletter of the Healthcare Leadership College



Image: Freepik.com

CONTENTS

2 Dean's Message

3 – 4Letter to Our Young Leaders A/Prof Tan Boon Yeow

5 - 6Pandemic: Everyone Has a Part to Play

7 – 92nd Singapore Nurse Leaders Programme (SNLP)

About The Healthcare Leadership College

The last two months have been quite a whirlwind ride. Prior to April, Singapore seemed to have managed the COVID-19 virus that gripped other parts of the world well, with only one or two sporadic infections once in a while. Many of us had become used to, perhaps even a little too comfortable with the situation, and were eagerly looking forward to when the limit on group sizes would be further increased. However, that predictable trajectory was disrupted by the wily virus.

The re-emergence of new COVID-19 clusters since late April has come as a timely and sobering reminder not to let our guard down. It is naturally disappointing to encounter this setback given Singapore's good progress since the second half of 2020, but by keeping our hearts and minds on the end goals and our leadership purpose, we will be able to soldier on with resilience. In this issue, Dr Tan Boon Yeow, CEO of St Luke's Hospital, shares how he anchors himself as a leader, by focusing on his leadership purpose, or the "WHY". We also look back on the 2nd Singapore Nurse Leaders Programme (SNLP) which took place between February and April this year, after having been deferred since early 2020, and are thankful that the participants were able to come together this year to learn and grow in their leadership journeys.

In the board game *Pandemic*, which HLC tested out in an alumni workshop in April, every player wins or loses together, and every single player has a part to play. This could not be more true of the COVID -19 pandemic. Stay well, and we hope that with the steps we all take today, we can return to a new normal in the not too distant future.

Dean's Message

Singapore is stepping down its Phase 2 (Heightened Alert) measures from 14 June 2021. These were triggered by an increase in community transmissions and unlinked clusters. The 2 most significant ones were in Changi Airport and Tan Tock Seng Hospital (TTSH). What happened in TTSH could have occurred in any hospital.

The operational burden in the healthcare institutions was significant. These included the separation of teams, enhanced surveillance operations, enhanced personal protective equipment measures and backend setting up of processes like RRT (Rostered Routine Test). All these required a major investment in manpower and resources. The enhanced surveillance protocol will continue and will form part of a new normal.

The burden has not just been with our healthcare institutions, but with the economy. It is good that we did not go back into full circuit breaker measures but titrated our public and social distancing measures to the profile of COVID-19 cases in Singapore. By responding adaptably rather than with a blunt reversion to the circuit breaker, it has mitigated an otherwise greater impact to the economy and livelihoods for our people.

Even though we have had success in bringing this latest spate of transmissions under control, it still looks like a game of "whack-amole" in trying to stamp out these more transmissible and virulent Variants of Concern. Any interim measure of success must never lull us to complacency.

Our experience and that of other countries which had COVID-19 well under control show that it is impossible to keep a country clear of COVID-19 barring a complete lockdown of its borders. This is especially so for Singapore whose lifeblood is its connectivity. As healthcare leaders, we need to be agile both in terms of mindset and responses. To play our part as Singapore moves to a state where we open our economy and our borders, we will have to accept and learn to manage a baseline number of COVID-19 cases with consequent morbidity and mortality, just as we have accepted this paradigm for influenza and dengue over the last few years.

We can certainly be optimistic about the future, but we must always remain alert and agile.



Professor Aymeric Lim
Dean, Healthcare Leadership College
Chief Executive Officer,
National University Hospital
Senior Consultant, Department of
Hand & Reconstructive Microsurgery,
National University Hospital
Professor, Department of Orthopaedic
Surgery, Yong Loo Lin School of
Medicine



A/Prof Tan Boon Yeow Chief Executive Officer & Senior Consultant Physician, St Luke's Hospital

It is imperative as leaders to be aware of the effects of our leadership by soliciting feedback on our leadership. This will help us hone our leadership abilities by finetuning our 'WHATs' and 'HOWs' so as to achieve our purpose or the 'WHYs' of our leadership.

Letter to our Young Leaders

A/Prof Tan Boon Yeow

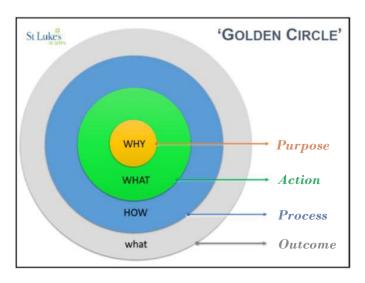
A/Prof Tan's experience spans from acute to community-based hospital care and primary care. His passion lies in the integration of care across the diverse settings that patients will traverse during their care journey. His leadership and academic appointments include Chief Executive Officer and Senior Consultant Physician of St Luke's Hospital; Chairman, Chapter of Family Medicine, Academy of Medicine Singapore and Adjunct Associate Professor at both National University of Singapore and Yong Loo Lin School of Medicine & Duke-NUS Medical School. He was also awarded the MOH National Outstanding Clinician Educator Award in 2019 under the National Medical Excellence Awards (NMEA) and 'The Albert & Mary Lim's Award' 2019.

Dear Young Leaders,

Have you ever asked yourself, "Why do I want to be a leader?".

What is your ultimate goal as a leader? What motivates and keeps you going as a leader? Perhaps many of you, like me, came into leadership roles quite "accidentally" and you did not aspire to be one. Yet, over the years, I have come to realise that it is vital to ask myself these crucial questions as a leader especially when I encounter challenges.

I find the 'Golden Circle' concept by Simon Sinek, a well-known author and speaker, a useful one to help frame the essentials in each of our leadership journeys. First, I ask myself the WHYs (purpose) of my leadership. Next, I seek to know the WHATs (means) that need to be done in order to accomplish the WHYs. Last but not least, I apply the HOWs (methods) in order to accomplish the WHATs.





Start with the WHY (Purpose)

I ask myself the 'WHY' question when I am asked to lead. I also consider if I am the best person for the job. In my opinion, I think we do not ask the 'WHY' question enough. This is the first and probably the most important starting point in our leadership journey. If we are not clear about this, our foundation would likely be shaken when the going gets tough, and we will struggle to chart the way forward (as commander-in-charge) and hold the team together.

I urge you to pause and ask yourself the hard question of 'WHY' in your current leadership role.

Know the **WHATs** (Means)





It may help to craft a purpose statement. My personal leadership purpose statement is: "To inspire, build, lead; and in so doing, to live out my Christian faith" The WHAT here includes the need to build the team and create a conducive environment for staff to grow, both professionally and personally. I also seek to inspire them to act and lead them to collectively accomplish the mission/goals of the organisation.

I find the following 'WHATs' essential in my leadership journey:

A. Embracing a Growth instead of a Fixed Mindset

Being open to new ways and solutions to challenges. The leader with a growth mindset is unfazed by challenges and failures, but see them as opportunities for growth.

B. Being Resilient

Being receptive to change and inspire the change process within the organisation. This is no easy feat and is oftentimes met with much reluctance and resistance. Leaders need to be hardy yet patient, in order to help their people and the organisation thrive in altered circumstances.

C. Having both Insight and Foresight

Possessing the ability to have a forward view and leverage on insights and prior knowledge to anticipate the future so as to chart the best way forward for the team and the organisation.



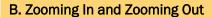
Apply the HOWs (Methods)

In order to realise the 'WHATs', we need to take specific steps. The following 'HOWs' build on the 'WHATs' listed above.

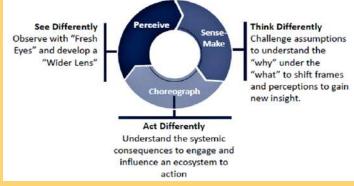
A. Applying the PSC (Perceive, Sense-make, Choreograph) Model

Honing the ability to perceive or to look at issues with new (and wider) lenses. Having seen a different perspective

to the problem, one then sets out to sense-make or think differently. This includes challenging the assumptions and understanding the WHYs and WHATs to reframe and gain fresh insights. Finally, having perceived and sense-made, we are then required to choreograph, which is to act differently by engaging and influencing the ecosystem to action.



I have also observed that many clinicians are good at dealing with issues at the micro or individual level



largely because we have been trained that way. To be an effective leader, one needs to acquire the ability to look at micro-, meso- and macro-level issues by zooming out to see the bigger picture. This is particularly helpful as we address current issues (insight matters), and also as we plan for the future (foresight) to provide anticipatory care.

Finally, it is imperative as leaders to be aware of the effects of our leadership by soliciting feedback on our leadership. This will help us hone our leadership abilities by fine-tuning our 'WHATs' and 'HOWs' so as to achieve our purpose or the 'WHYs' of our leadership.



Image: livescience.co

Pandemic: Everyone Has a Part to Play

n the highly-rated board game *Pandemic*, players battle against four different infectious diseases that are spreading across global cities. Players take on different roles, such as Medic, Scientist, and Quarantine Specialist, and work together to treat populations that have been infected; prevent serious outbreaks; and discover vaccines for the diseases. Game designer Matt Leacock based *Pandemic* on the SARS outbreak of 2002-2004.

Pandemic is a cooperative board game, meaning that players work together to achieve a common goal, and either win or lose as a group. The game ends with only two possible outcomes: (I) Players win against the game when vaccines have been developed for all four diseases; or (II) Players lose against the game when too many new infections and outbreaks occur and the diseases can no longer be contained.

In mid April this year, HLC ran a workshop where some of our alumni came together to play *Pandemic*, one of the objectives being to allow participants to appreciate the opportunities and challenges of cross-functional collaboration within a team through serious game play. We had been planning to run this serious game within one of our milestone programmes for some time, but it had

taken a while to properly develop and test the lesson design, game scenarios, and facilitation plans. We also wanted to wait for a better time when the COVID-19 situation was more stable and under better control in Singapore, to avoid trivialising or making light of the situation. When we were eventually able to beta-test Pandemic in April, we were encouraged by the positive reactions from the alumni participants, and the learning potential for game offer safe environment the for participants to discuss more deeply the tradeoffs of collective working, such as individual sacrifices that might have to be made for the larger team mission. We were looking forward to incorporating this game permanently in one of our milestone programmes in the future.



The discovery of new COVID-19 clusters in Singapore in early May, whether seeded from other countries or transmitting undetected Singapore for some time, is of concern and has cast a pall over our collective national progress in the COVID-19 pandemic. Much of what we have seen in the past couple of months parallels common scenarios in the Pandemic game. New re-infections. of "previously infections and uninfected cities" and "fully treated cities" can appear seemingly out of nowhere and rapidly grow, if you draw an "unlucky" infection card or if you had not acted on an earlier infection in a timely manner. Once a new infection appears, treatments / vaccination must be carried out aggressively so that these new infections do not escalate rapidly into outbreaks. If an outbreak cannot be prevented, then rapid ring-fencing of the affected city must be carried out to prevent infections from spilling over to neighbouring cities and causing a chain reaction of outbreaks.

Many of the COVID-19 measures are not complex or difficult to understand, but yet can be extremely difficult to implement well and comprehensively. Every single person in the population is a key player and must play his or her part. It only takes one weak link in the entire system for previous progress and efforts to be eroded, wiped out, or completely overwritten. The effort, committment and sacrifices required of all, go beyond relying on a few leaders, government ministries, major institutions or organisations to take action.

And therein lies the enormity of the task ahead for Singapore and the world. When all of us have



Individually, we are one drop.

TOGETHER

we are an ocean.

- Ryunosuke Akutagawa

different motivations and understanding of the roles we play; when individual risk is far smaller than collective societal risk; when many of us have to make considerable sacrifices but have little to gain individually by taking effective actions; when seemingly tiny actions or inactions appear so inconsequential today, but can have such serious and wide-spread repercussions just a month later, how then, can we marshall ourselves to come together collectively to achieve that large goal of prevailing against COVID-19?

In the real-life COVID-19 pandemic, Team Humanity is pitting our collective wits, determination and effort against the disease. Unlike in the board game, the real-life pandemic that we are all going through now is not yet over even though vaccines have been developed and rolled out. How the pandemic will evolve and progress in the next few months and possibly years, and whether we can bring the number of new infections, re-infections, and outbreaks to a manageable and acceptable level, falls on each one of us to do our part.





2nd Singapore Nurse Leaders Programme (SNLP)

The 2nd Singapore Nurse Leaders Programme (SNLP) took place between Feb and April 2021, after a delay of one year due to the COVID-19 pandemic. The SNLP is a national programme to groom level 2 nurse leaders to be advocates of change with strong leadership and policy perspectives. In addition to inperson seminars and workshops, the programme includes a community care exposure component where participants gain an understanding of the care models, roles and scope of nursing practice within different community care settings.

Despite the stresses and challenges brought about by the ongoing pandemic, the 27 nurse leader participants learnt, grew, and bonded together during their 3 month SNLP journey, culminating in a small but meaningful graduation ceremony where they presented their group projects and shared their ideas for Singapore healthcare. Catch a glimpse of the participants' SNLP experience in the following photos.



Finding out about Singapore's ageing demographics, the considerations and trade-offs in healthcare policies, as well as the directions ahead for Singapore's healthcare future

Mentoring sessions with SNLP Programme Mentor, Mrs Lee Siu Yin



A "Virtual Learning Journey" to Kampung Chai Chee, hosted by the SingHealth Neighbours Team







20 days of attachment to different community care & acute nursing organizations



Dialogue on Transforming Healthcare to Realizing Our
Vision by Ms Kuah Ling
Ling, Co-Founder, Jaga-Me



Some Insights from our Nurse Leaders:

I used to think... nurses should follow instructions from the top. Now I think... we should listen to the ground.

l used to think... leadership is about supporting my own department / organisation, now **l think** as leaders we need to collaborate beyond the department / organisation.

I used to think... leadership is about managing the team, now I think it's about engaging, empowering, and influencing.

The 27 Nurse Leaders from 2nd SNLP



1st Row (From Left to Right): Lim Mei Ling (TTSH), Yasoda S S (TTSH), Mok Kar Yen Caren (TTSH), Lynette Thng (KTPH), Goh Soon Pang (KTPH)

2nd Row (From Left to Right): Tan Hongyun (WHC), Chan Hoi Sum (KTPH), Wang Shan (TTSH), Annie Pah (KTPH)

Not in Picture: Hu Xiaomei (IMH)

(From Left to Right): Cynthia Wong (NKF), Tay Shufen (HPB), Cinthia Lim (Tsao Foundation), Seah Baojuan (All Saint Homes)





(From Left to Right): Liang Sufang (NUH), Teo Hui Sin (NTFGH), Seri Sastika (NUH), Mrs Lee Siu Yin, Liu Huan (AH), Peck Sin Yee (AH)

(From Left to Right):

Ang Li Ping (SingHealth Polyclinics), Jessie Lee (Sengkang General Hospital), Fam Su Rong (NNI), Ann Chan Sok Theng (NHC), Lee Xunyi Sean (Singapore General Hospital), Hei Geok Mei Andrea (KKH), Chong Yong Jiin Stacey (CGH), Charlene Wimala Qing Fang (KKH)



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

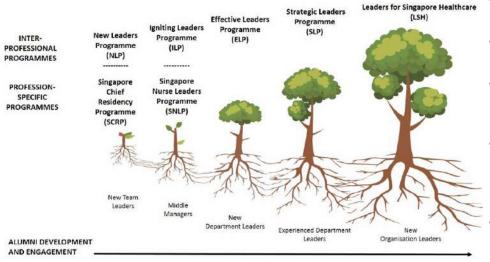
Editorial Team

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 Chia Li Hui

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)



Ms Goh You Li

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: Mr Jared Koh

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 Chu Min Lian

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 nursing at the approach towards RHS-level. nurses programme is designed to equip with the necessary knowledge and skills to lead care across multiple facilities- acute and community sectors. The SNLP aims 2 level 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

