

LEADING HEALTHCARE

The newsletter of the Healthcare Leadership College



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What does leadership look like? What should a leader do? How should a leader act? At HLC, we have had the privilege to have many leaders generously share their leadership reflections, practices, successes, and more importantly, their failures. Our participants and alumni have been deeply inspired by their determination and the common thread that runs through all their sharing – that leadership must be anchored in values and that leaders must have a strong moral compass.

In this issue, we hear from two highly respected and eminent individuals – Prof Tan Chorh Chuan and Dr Noeleen Heyzer, about their practice of leadership and their thoughts on what it means to be a leader. We also share some behind-the-scenes photos of the inaugural Leaders for Singapore Healthcare (LSH), in their 4 month journey of self-discovery, finding purpose, and building firm friendships across institutions, clusters, professions, and sectors. This issue also features some useful tips about "getting on the balcony", as a key principle of adaptive leadership, which can allow leaders to gain an understanding of the bigger picture rather than being swept up in action all the time.

I asked my 8 year old son what he thought leaders did. This was his answer, "I think leaders are like the base plates in Lego. They bring together all the different types of Lego blocks, even if some of these are special parts that don't fit well with most other blocks. And you can use your Lego base plate to build all sorts of tall and creative structures. Without the base plate, everything will not stick together well and the Lego blocks will all fall apart!!!"

That is a very good reason why leaders and leadership matter.

Dean's Message

Finish When the List is Done

There has been much written about addressing stress and burnout with work-life balance. I aim to offer a different perspective on these issues.

Physician or healthcare worker burnout is largely due to work and patient demands, reasonable or unreasonable. This is alleviated when healthcare workers are supported by good leadership. This is compounded when healthcare workers are undermined and disheartened by poor leadership.

Two years ago, a cardiology department had waiting times of up to a few months for angioplasty and elective percutaneous stent interventions. There was a change of leadership and within 3 months, the waiting times had dropped to a few weeks. The new Head of Department, when asked what he had done to achieve these changes, replied with a question, "What time do you think we used to finish the cath lab patient list and what time do you think we finish now?"

I answered that my guess was that in the past, they used to finish at 4pm and now they finished at 7.30pm. The new HOD said that this was not the point. They did not aim to finish according to a fixed timing. They finished when the list was completed. This new HOD had a new approach to patient care, one that was focused outwardly. An approach that was focused on the needs of the patient.

The morale of the department also improved significantly. The staff worked harder but were also more motivated because they delivered excellent patient care.

How does this address the stress and burnout? The more we focus on ourselves and on our lifestyles, the greater our inclination to burnout. We have seen this in colleagues whose hearts were not really into patient care or service. We should always remember that in our choice to be healthcare workers, we accepted a moral and professional obligation to be the strongest advocate for our patients and to strive for the best patient outcomes. The nature of healthcare is such that it would be impossible to achieve these goals with a 9 to 5 mindset. Instead, having a "clear the list" mindset will allow the anxious, starving patients waiting for their definitive procedure to be treated sooner, be discharged at least 1 day earlier, and get back to their normal life. This is in their best interests. The reduced length of stay relieves bed pressure in our busy emergency departments and provides better value-driven outcomes. It also focuses the team on efficient team-working to minimise turnover time, optimises facility utilisation, and gets every patient who is ready for their procedure treated the same day. These are all achievements we should be proud of and receive immense satisfaction from.

When our focus shifts from ourselves to patients, and we serve them well and they are happy, our stress decreases.



Professor Aymeric Lim
Dean, Healthcare Leadership College
Physician-in-Chief, The National
University Health System
Group Chief Human Resource
Officer, The National University
Health System



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Prof Tan Chorh Chuan

The inaugural Chief Health Scientist and concurrently, Executive Director of the new Office for Healthcare Transformation in Singapore's Ministry of Health.

Our healthcare system, while very good, needs to transform itself to be effective in a fast-changing future. People, especially leaders, are fundamental to this transformation.

A Letter to our Young Leaders

Prof Tan Chorh Chuan

Prof Tan served as President of the National University of Singapore from 2008 to 2017. He was former Dean of the NUS Faculty of Medicine and served as the Director of Medical Services, Ministry of Health, from 2000 to 2004, in which capacity he was responsible for leading the public health response to the 2003 SARS epidemic. As the inaugural Chief Executive of the National University Health System in 2008, Prof Tan brought the NUS Medical and Dental Schools and the National University Hospital under single governance.

Dear Young Leaders,

Our healthcare system, while very good, needs to transform itself to be effective in a fast-changing future. People, especially leaders, are fundamental to this transformation. I would like to share my personal reflections on leadership and in particular, how small groups of people might influence a large complex system. I hope you will find this useful.

Start with your motivation

What is your personal motivation to take up a leadership role? What are the burning issues that you feel should be addressed after 5 years, after 10 years? What is the strength of your conviction? Whenever I am offered new leadership opportunities and roles, I start by asking myself what are my personal reasons to lead.

The first time I did so was when I was unexpectedly asked to be the Dean of the NUS' Faculty of Medicine. I asked myself "Why did I want to be the Dean? What are the major issues that must be tackled and why are these important?" I decided to accept the role because I was not satisfied with the status quo then, and felt I should step up to help change things.

I encourage you to have the same sense of "constructive dis-satisfaction". If you care enough about the system and its future, do something about it. We currently have a good system but it can always be improved, and it certainly needs to be enhanced and reshaped for a future which will be very different.

I hope you will find time to reflect on your personal motivation to lead as this provides the key driving force for your own leadership journey. There are of course many different types of leadership and many successful ways to lead. Personally, I particularly admire leaders with small egos but who seek to create a large societal impact beyond themselves and their organisations.

Engage-do-learn

A large part of transformation involves influencing and persuading others to do things differently. This is usually not easy. Why would people want to work with you to reshape things?

How do you persuade others, including parties that you have no "control" over, to come along? I think one of the most important steps is to develop the case for change which is compelling not just for yourself, but for those you are seeking to engage as partners in that change. This often means finding the common areas of interest and/or bigger system-level goals that provide the shared impetus for action - in other words, when working together, both you and your partners are better able to achieve these and other goals. It also means that you need to have, or should develop, useful value propositions for those you engage.

There are many stakeholders in the health system whom we need to influence to make change happen. Effective engagement is central to this process. There are different approaches but one I have found useful is to progressively engage broadening concentric circles of stakeholders and partners. Start with a core group of people or partners whose participation is important and who are more likely to have a commonality of goals, and work together with them. Learning from this, and ideally with some proof-of-concept points, engage a next and wider circle of people and partners to work together on the same or complementary areas, and so on.

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As a leader, it is always good to have a small kernel of doubt. It enables you to really listen and to adapt and change when others have better ideas or raise important points you had not considered. I would also note though that if your kernel of doubt is too big, it results in indecisiveness.

I would encourage you to speak to a wide range of people, including critical ones, and test your ideas with them.

At each stage, you will likely encounter probing questions and receive much feedback including difficult ones. On the surface, this could be a discouraging process. Instead, I feel that such candid and deep engagement is actually very valuable. It allows you to gain a better understanding of your partners' interests and concerns. and to articulate how joint action for change could also address them. Open, robust but constructive engagement also serves to build the trust and respect essential for successful partnerships.

I also find that being asked difficult questions forces you to reflect on your own assumptions and to improve your initial ideas and plans very substantially. As a leader, it is always good to have a small kernel of doubt. It enables you to really listen and to adapt and change when others have better ideas or raise important points you had not considered. I would also note though that if your kernel of doubt is too big, it results in indecisiveness. If it is too small, you effectively stop listening to others. But if you can strike a good balance, it will stand you in good stead in this "engage-do-learn" framework.

In this spirit, I would encourage you to speak to a wide range of people, including critical ones, and test your ideas with them. In explaining and defending them, your own thinking becomes much sharper. Similarly, as leaders, we can also foster a constructive culture of engagement and robust discussion in our organisations and with our partners.

Little things help to create the right culture - be encouraging when your colleagues and staff raise new ideas; take on these ideas if they make good sense and always give credit to those who originated them. Innovation and transformation require that things are done differently, sometimes very differently. We therefore need to foster a culture of wanting to do things differently but within a framework that enables these to contribute effectively to wider system-level changes and goals.

Influencing and making change in a large system

Leaders need to take a system perspective. It is important to understand how incentives, enablers and administrative levers all come together at the system level, and how these might be aligned differently to promote, enable or support the adoption of the needed change at scale.

For example, at the MOH Office for Healthcare Transformation (MOHT), we asked ourselves what are the pivotal points of healthcare transformation. Our healthcare system's shift towards primary care is one such pivot. Within this, we also asked which are the most critical bottle-necks which if deconstrained,

could substantially accelerate positive change. One of the key areas we identified is the effective scaling of successful pilots.

MOHT works with partners on pilots. The pilots are important because it helps us understand the ground realities and shape our thinking at the system level. It also allows us to better define the enablers necessary for scaling and to work with the relevant partners to develop these. If we can do this successfully, our hope is that we could create generalizable enablers that would enable faster and more efficient scaling of meritorious pilots across the health system. The MOHT is a small unit and if we can make this approach work well, this would be an example of how a small group of people can influence and make changes in a large system.

People are most fundamental

I once asked the captain of a very successful NUS dragon-boat team how she led her team. I was impressed by her answer.

She said she has to know her team's true capabilities very well - how fast can the team go and for how long can they sustain a particular pace, so that she can time their sprints at the right moments.

We have many ideas and want to do many things.

However, we need to understand the teams we work with well. This is really important for leaders because at the end of the day, it is not just the vision and ideas that count, it's the ability to execute them efficiently and well.

I believe that many of our colleagues and teams appreciate leaders who can articulate a good vision and are also clear about their priorities and are able to make things happen. After all, most of us want to feel that our work is contributing towards a meaningful impact, As leaders, there is much we can do to extend the horizons of the possible for those we work with and for - to raise the level of motivation, and foster a greater sense of excitement and fulfilment that allows more things to be done at speed. This requires hard work, but in turn, it makes our own roles as leaders more meaningful and fulfilling. We lead others but we also serve those we lead.

I wish you all the very best as you progress in your own journey of leadership and contribution.



Leaders for Singapore Healthcare

Milestone Programme for Senior Leaders

HLC ran the inaugural Leaders for Singapore Healthcare (LSH) from Sep 2018 to Feb 2019. The LSH is our apex milestone programme for senior leaders with organisational level responsibilities.

The inaugural LSH class comprised 19 leaders from public healthcare, and the ILTC and GP sectors. The LSH participants spent 20 days over 4 months learning together, had deep discussions on the collective leadership needed to transform Singapore healthcare to build a sustainable system for the future, and committed to the vision of a one healthcare family.

The LSH was a journey of self-discovery, of reaffirmation, and of purpose-finding. It was also about making new friends and reconnecting with old friends. We share with you the LSH journey in photos.



One LSH, One Healthcare Family, One Singapore Health



Preparing to hit the streets of Shanghai



Immersion learning in a Shanghai supermarket



Navigating the streets of Shanghai



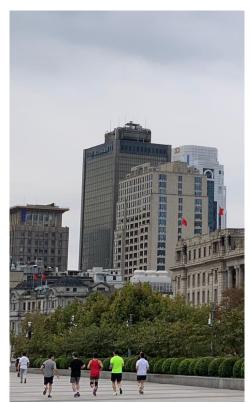
Exploring Shanghai



The class had the privilege to dialogue with Prof Lim Pin



We are driven by a common purpose. Let's collaborate!



Beyond Healthcare to Health: 7am run by The Bund, Shanghai



The class also visited Mumbai!



The class sharing a good laugh together



Tiramisu-making: learning from outside of healthcare



Collectively shaping the future of Singapore healthcare



Shopping!

Getting off the Dance Floor, and on the Balcony

ADAPTIVE LEADERSHIP

In any organisation, your chances of success depend on your ability to observe and synthesize a complex set of often conflicting signs and data. When you are involved in too many meetings, too much information and unable to focus on few priorities. These frustrations are common to all.

One effective strategy that will help you make sense is to periodically step back from the action. Picture this as leaving the "dance floor" where the action is and "getting on the balcony," so that you can observe the action. This is not as easy as it sounds. There are a lots of pressure to remain on the dance floor. E-mail, meetings, wards, and mobile phone are where the action is.

Leadership is an improvisational art. You may be guided by an overarching vision, clear values, and a strategic plan, but what you actually do from moment to moment cannot be scripted. You must respond as events unfold. While today's plan may make sense now, tomorrow you'll discover the unanticipated effects of today's actions and have to adjust accordingly.

But taking a balcony perspective is extremely tough to do when you're fiercely engaged in daily operations, being pushed and pulled by the situations and people around you. This is easier said than done. As you seek input from a broad range of people, you will need to observe your own actions; seeing yourself objectively as you look down from the balcony is perhaps the hardest task of all.

You need not physically leave a meeting or the ward to get out on the balcony. Great athletes must simultaneously play the game (dance floor) and observe it as a whole (getting on the balcony). Watching what is happening in the moment of situation while it is happening—even as you are part of what is happening and observe the relationships. In short, "get on the balcony" to observe patterns of conversation and action around you. Take yourself out of the fray to understand what is going on. Being on the balcony is where the perspective is clearest but you must return to the dance floor to make an impact.



Tips of the month

So how do we get on the balcony?
Here are some suggestions, along with personal tips from the MOHH team:

1

Take some quiet time.

The

Listen to your boss, and to his/her boss.

3

Get underneath the specific activities, and look for patterns and causes.

For healthcare professionals, the day is filled with chores, saving lives, care-taking and endless of 'to-dos'. Quiet time will help calming the noise in the brain and give you clear perspectives on the issues on hands. It also make the mind more receptive and flexible in dealing with complex environment.

The people you report to are responsible for seeing a larger picture than you manage. They may hear from people that you don't meet and it is always in your interest to understand their perspective.

Think of someone in your office or ward who performs their tasks poorly. What would you do? Correcting them will not get you onto the balcony because you are responding to specific events. Step up onto the balcony by looking out for patterns or causes to their mistakes.

"I listen to music during my drive to work. When I sing along to the songs, my brain stops its feverish hunting of solutions to work problems. I arrive at work with a rested and clearer mind."

- Lee Shiao Wei, Director HLC

"Ask questions if faced with difficulties or if you are in need of anysupport. But before this, it helps if you have a good rapport with yourteam so they are more receptive to help and feedback."

- Selin, Assistant Manager LOD

"Get out of your comfort zone. Once a week, I will watch a different kind of movie, try food I have never had before. Likewise, expand your social circle by spending time with people who are diverse racially, culturally, politically, and in age."

- Reina, Executive HLC

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Distinguished Speaker Series

An Afternoon with Dr Noeleen Heyzer

HLC held its 4^{th} Distinguished Speaker Series (DSS) on 30 January 2019 at The Academia.

Our Distinguished Speaker, Dr Noeleen Heyzer, was an Under-Secretary-General of the United Nations and the highest ranking Singaporean in the UN during her term (2007-2015). She was the first woman to serve as the Executive Secretary of the UN Economic and Social Commission for Asia and the Pacific since its founding in 1947.

In your career, what are some major leadership lessons that you have learnt?

Leadership is not about self. When you are in a leadership position, you will have power and authority. In other words, you have the privilege of occupying a position that allows you to do things. How you exercise that power is the nature of leadership. It is important to also have a strong moral compass and not to think of leadership as power but as service.

For example, in humanitarian situations, where things happen quickly and unexpectedly, there is a need to exercise command and control. But in most cases, leadership can be less formal and more empowering, giving people respect and dignity, and engaging in a way that brings out the best in them.

It is important to see opportunities in crisis. Even in the worst of situations, there is always something that you can act on and to catalyse new possibilities. Another key lesson that I have learnt is to like people, believe in people, and to harness the goodness of the people who you are working with to build team power.

One of the best encouragement I received was when my staff told me that I had helped them to be the best version of themselves. This helped me realise that everyone has much potential in them. Therefore, take good care to restore and refresh yourself, and nurture yourself so you can be a better human being and a better leader.

What motivates and inspires you during difficult times?

At the end of the day, we have to understand what drives us. For myself, I have been able to turn my strong feelings of anger and injustice, towards driving positive change and making a difference. Instead of being critical when you encounter problems, be part of the solution, be creative in finding different ways forward, and realise that you are not alone. In fact, what has kept me going is that strong sense of purpose, belief in what I do, and collaborative leadership. My work has shaped me and given me more than I ever expected.



Dr Noeleen Heyzer

What type of leadership do we need today? I call it a bold, accountable leadership for a Changing World. This means we need to have leadership that builds the trust and solidarity that we see missing in so many parts of the world.

Medicine is a science but healthcare is an art that actually takes account of the whole-of-life approach.

Leadership is not just an official position. You can have different people exercising leadership at every level or situation.

Can you share more about the peace baskets and how it transformed lives?

When I was the Executive Director of the United Nations Development Fund for Women (UNIFEM), I visited Rwanda after the genocide and met countless Hutu and Tutsi women, who were raped, infected with HIV/AIDs, caring for orphans from the genocide without any source of income. After spending hours with them, listening to their stories I found they were weaving beautiful baskets as they were recalling their experience of devastating violence. These were used for their everyday purposes. I decided to immediately create symbolic value by naming them the Peace Baskets as it captured the spirit of women weaving back their communities and peace across ethnic lines despite untold sorrow.

When I went back to New York, I contacted my friend Willa Shalit and together we work to open up markets for the baskets based on its symbolic value. We partnered with the Chairman and CEO of Macy, Terry Lundgren, to establish a global market for these unique works of art. In September 2005, Macy's department store introduced the very first Path to Peace Baskets.



The Path to Peace Baskets* Transformed lives of Rwanda women.

What type of leadership do we need today?

I call it a bold, accountable leadership for a Changing World. This means we need to have leadership that builds the trust and solidarity that we see missing in so many parts of the world.

One of the roles of the United Nations is setting norms and standards, agreeing on ground rules for our world based on shared values and shared responsibility. The world is changing, we cannot use archaic methods to respond to this changing world of growing inequalities, technological and social disruptions, and climate change.

There are many ways to engage globally and be a global leader at this pivotal moment when we are implementing the Sustainable Development Agenda. Thus, we need to build up our citizens and the newer generation of leaders to manage various tensions and participate in managing the direction of development to be more inclusive and sustainable.

What is your advice for our healthcare colleagues here who wants to lead change?

Medicine is a science but healthcare is an art that actually takes account of the whole-of-life approach.

Leadership is not just an official position. You can have different people exercising leadership at every level or situation. So build multi-sectorial teams and encourage collaboration to improve human health: physical, emotional and mental.

What is your personal mantra to leading yourself?

What I try to do in life is to ride its waves and turn its tides. Not one tide at a time to lift a boat, but transformational changes that will raise all boats, leaving none behind.

In your opinion, what do you think Singapore can offer to the world and to Asean?

Singapore has a lot to share with the world. We have pursued excellence in many areas – healthcare, education, urbanization, transportation, and so on. There are no reasons not to spread our hands out and to be a more connected neighbor, not just in the region but also globally, contributing to both regional and global public goods.

We should also expand our perspective of what we mean by learning from the best. In fact, there is no single definition of "best". If possible, learn different things in different situations. Even in the most desperate and devastating of situations like the Sichuan earthquake, I was able to learn the meaning of resilience from children common people, the strength of the human spirit.



The ability to learn, appreciate and to have eyes that do not discriminate along gender, class, religion and geography is very critical.



Dr Heyzer's sharing on her humanitarian efforts during the Sichuan 2008 earthquake.

^{*} The sale of these baskets provided real, sustainable income to the Rwanda women who had never before earned such money in their lives.

Alumni Connect

LEADERSHIP in PERSPECTIVE

In this issue, we have asked **Dr Ivan Woo Mun Hong**, Principal Medical Social Worker, Department of Care & Counselling, Tan Tock Seng Hospital, to share his perspectives on being an effective leader.

Effective Leadership: Five Focus Areas for Healthcare Leadership

Values Above All

Treasure **values** above knowledge, skills and connections. Followers follow leaders for their values, not knowledge, skills or connections.

Read Broadly

Read beyond your discipline, especially **humanities** and non-traditional body of knowledge. Healthcare sector has the brightest minds and yet it has not found a sustainable solution for the future of healthcare in Singapore and the world. The solution may lie outside healthcare.



The Larger Good

Focus on good of **population** and beyond instead of cluster, institution or individual. This will differentiate you from many leaders in the world.

Give Hope

Leaders lead, followers complain. Leaders need to give **hope** and people who complain cannot offer hope. This is the burden of leadership.

Learn from Failures

Seek to influence and capitalize on **failures** as teachable moments. Leaders should not demand respect but earn respect through their influence. Leaders also need to extend 80% forgiveness for the 20% mistakes we make in life. No one has full certainty on the solutions generated for healthcare. A mistake may be the solution we have been seeking for all the while, and we need to have the humility to appreciate that all mistakes are learning opportunities.

Each issue, we will feature an article from our alumni or responses from some leaders to your questions. Why wait? Post your question and send it to **hlc.alumni@mohh.com.sg** with your Name, Institution and Cluster now.

Hope these 5 principles can enrich your leadership journey!



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

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Professor Aymeric Lim Dean, HLC

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Ms Lee Shiao Wei Director, HLC Mr Dennis Loh Deputy Director, HLC Ms Pacillia Ng Assistant Director, HLC

Editors

Assistant Manager, HLC **Ms Nicole Lee** Executive, HLC

Ms Carol Tang

Upcoming Events

6th Singapore Chief Residency Programme (SCRP)

30 May - 1 June 2019 11 July 2019 16 August 2019

Email: jared.koh@mohh.com.sg alfred.cheong@mohh.com.sg

14th Igniting Leaders Programme (ILP)

21 - 24 May 2019 26 - 28 June 2019

Email: carol.tang@mohh.com.sg

17th New Leaders Programme (NLP)

9 - 12 July 2019

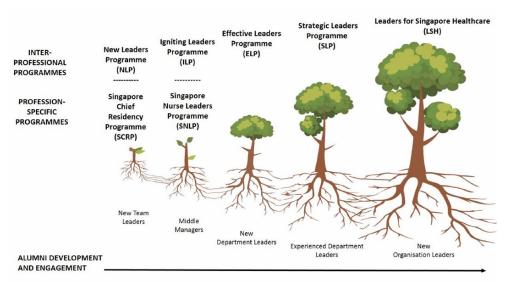
Email: carol.tang@mohh.com.sg

7th Strategic Leaders Programme (SLP)

22 - 26 July 2019

Email: minlian.chu@mohh.com.sg

Leadership Milestone Programmes (Cross-Profession)



OBJECTIVES

- 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 Carol Tang

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
Ms Alicer Lim

^{*}Please contact respective managers for more information.

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.

works and relationships acare 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 Karyn Choo

Ms Alicer Lim

^{*}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 (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 Jared Koh 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 Alicer Lim

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 admission fees are fully subsidised by the Healthcare Leadership College.

Programme Manager: Ms Carol Tang
Ms Nicole Lee

*Please contact respective managers for more information.