



# LEARNINHG

A Newsletter of NHG Group Clinical Education

JUL/AUG 2025

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**IS MORE TECH  
ACTUALLY  
MORE IN  
HEAL+H?**

9 - 10 OCT 2025 SINGAPORE EXPO

**Mastering the Feedback Conversation**  
Held in-conjunction with SHBC



for.sg



7 October 2025  
(Tuesday)  
8:30AM - 1:00PM



LKC Medicine  
Clinical Sciences Building,  
Seminar Room 7-1



**HAPPY  
NATIONAL DAY!**



**NHGEducation**

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**INSPIRING Professionals  
IMAGINING Tomorrow  
ReINVENTING Healthcare**

**NHG EDUCATION**

# You'll Never Walk Alone: NHG Health's First Resident Induction Camp

Over three weekends in July, D'Resort at Downtown East played host to NHG Residency's inaugural Resident Induction Camp. 156 newly-minted residents (medical specialists in training), together with some 20 programme directors and senior management, braved the elements – from scorching sun to rain, sea and sand – as they participated in this first-ever two-day-one-night induction programme. This marked a significant milestone for NHG Health introducing an immersive camp experience to welcome junior doctors commencing their specialist training.



Residents from run one of the inaugural resident induction camp

## Senior Leaders Welcome

"Welcome to NHG Residency! It's a privilege for us to have you join the family," said an elated Professor Joe Sim, Group Chief Executive Officer, NHG Health, in his opening address.

"We thought it's very important that we properly welcome you into the family (and) allow you to appreciate the organisation you'll be working for... because now you're part of our family for the next few years. It's very important that you get to know each other and the seniors around you.

"Hopefully through the next two days, we can learn more about what matters most, particularly our corporate values, what makes us stick, and why we are here."

Sharing the same sentiment, NHG Residency Designated Institutional Official, Assistant Professor Llewellyn Lee, said: "We've always had something like this as part of residency induction... and it's because we really want you guys to work together and gel... and more importantly, get to know one another."

He elaborated that with everyone's busy schedules and the nature of the healthcare working environment, opportunities for doctors to get to know or bond with each other become difficult.

"Hence, we wanted something a lot more informal with adequate time for you to know your batchmates.

"And this will prove to be very important, especially in the future... nothing beats calling up your friend or colleague, and asking them for help when something very important crops up. It will save you a ton of unnecessary work," urged Asst Prof Lee. "Trust me."

In her address, Associate Professor Michelle Jong, Group Chief Clinical Education Officer (NHG Health) shared some important nuggets of wisdom with the new residents stepping into the next phase of their medical career.

She shared her personal story about the "journey" to have char kway teow (stir-fried rice noodles) with four male senior leaders after the "senior management" version of the resident induction camp.

"When you have four men, there are four different opinions about the route to get to the char kway teow, right?" she quipped.

"When I glanced at my GPS (Global Positioning System), it was telling us a completely different way.... And of course, we got there much later than what the GPS indicated."



One lesson from this is that sometimes “when you have established practice within the hospital, where people may have a wealth of experience... and when some new things (e.g. GPS) or new people join the system, their ideas may get negated by the experience in the room”, she said.

It is important to remember “the purpose” when there are many opinions in the room, A/Prof Jong stressed.

“It is not about getting there faster, or getting there using the best route,” she said.

A/Prof Jong also reminded the residents about knowing their own purpose in this healthcare landscape.

“I hope you remember the purpose of why you’re doing what you’re doing (treating others)... and also to remember that you are important too,” she said.

“As you journey in residency, I hope that you balance your bank accounts well... not just your financial bank account, but your time, social-relationship, mental, as well as your physical bank accounts. Sometimes it’s hard to juggle all these bank accounts.

“I hope you try to find your way, and learn from others.”

## Getting to Know NHG Health

The camp had residents and NHG Health senior management go through a series of different puzzles and physical challenges both in and outdoors that tested their tenacity, creativity, and ability to work in teams despite meeting for the first time.

While many residents were initially sceptical about having to rough it out over two days, many were appreciative of the opportunity to better understand NHG Health, mingle with the senior leaders, and most importantly, get to know their peers from other specialties.

“Initially, I was quite sceptical coming here, but having spent two days together, I learned more about NHG and the core values and everything. And I am looking forward to meeting everyone along the way as well,” said psychiatry resident, Dr Aishwarya Alasiam, from the first run.

Sharing the same sentiments, internal medicine resident, Dr Ben Tay, was also initially puzzled by the ‘secrecy’ of the camp, due to the limited (but essential) brief given. However, he soon understood the rationale behind it, and even took away some key learnings from that experience,



Asst Prof Llewellyn Lee (left) together with his rafting team

which he paralleled to his residency training journey. “We will not know what’s coming next up, and I think there’s no choice but just to push through; and it’s nice to have a new family that we now know will be beside us,” he said.

“The miscellaneous time outside of the activities helped me to catch up with old friends, and meet new ones,” he said.

“This opportunity allows me to get acquainted with fellow starting residents (who are younger as well), and these will be people journeying alongside me as (we) go through residency training. It would be nice to see a familiar face in hospital from time to time, knowing they are going through the same ‘stage’ as me,” said ophthalmology resident, Dr Seah Wei Hing.

“At the start of the camp, we were introduced to NHG Health’s vision, mission, values, and goals. These core principles were consistently reinforced throughout every activity, allowing us to see how they were integral to the way we work and interact. As the camp progressed, it became increasingly clear how each element was interconnected, and how they came together to form a cohesive and effective system,” shared psychiatry resident, Dr Claudia Choong Startup.

“Through the camp, I had the opportunity to form new friendships with cohort mates I hadn’t known before, and to deepen my connections with those I already knew. I gained valuable insights into the experiences of residents from other specialties and appreciated the chance to share my own experiences with them.”

Dr Ravintharan Zi En S/O K Selvaraja, family medicine resident, felt that the activities paved the way for good discussions. “It provided a protected platform for interaction amongst the residents, and allowed for reflections on how best to align our development with NHG Health’s goals and aims,” he shared.

"NHG Health truly embodies that family spirit. This was one of those wonderful opportunities for us to let our guard down, get to know each other more personally, and understand each other's perspectives better," shared Dr Kevin Chong, orthopaedic surgery resident.

"In our demanding profession, where personal time is scarce, taking moments to truly connect with one another has been incredibly beneficial. My residency batch and I cherish lifelong memories from our camp experience, and we are eagerly planning another trip together!"

“

**I hope it gives you a little taste of the possibilities when faced with uncertainties, and how by harnessing the collective wisdom, strength, and energy of everyone, we can make things happen."**

**- Prof Joe Sim, GCEO, NHG Health (middle)**



Click [here](#) for photos from the Resident Induction Camp (Part 1)

Click [here](#) for photos from the Resident Induction Camp (Part 2)



Teamed up with senior leaders, the residents went on a life-sized monopoly (Pasir Ris Park edition) challenge

### **You'll Never Walk Alone**

"I'd like to thank all of you for taking your time to join in this camp," said Prof Sim.

Drawing upon the lessons learned from the activities, Prof Sim stressed that the games serve as a reminder of the importance of having protocols and friends in the workplace. However, at times, there is a need to change the way(s) things are done (or set by protocols) in order to have breakthroughs.

"I hope it gives (you) a little taste of the possibilities when faced with uncertainties and impossible tasks, and how by harnessing the collective wisdom, strength, and energy of everyone, we can make things happen," said Prof Sim. "I hope you keep this feeling and have it grow like a seed in your heart, so that you can see how this can manifest as you progress through the system."

"Your journey is not going to be easy, but what I want you to take away is that you will never walk alone," he stressed.

"You have friends around you, at least from today's group and also from your residency, your partners, and your seniors. So don't feel shy if you are in trouble or when you're struggling, do feel free to shout out to help. Your PDs (programme directors), your PCs (programme coordinators) are there for you, and your friends are there for you... we are like your family," he concluded.



# Leadership Lessons from Healthcare Leaders: Building Trust, Managing Change, and to Lead with Kindness



This year, the NHG Health Chief Resident Induction Programme (CRIP) invited guest speakers Clinical Associate Professor Wong Hon Tym, Senior Consultant (Ophthalmology), and Professor Tham Kum Ying, Senior Consultant (Emergency Department), from Tan Tock Seng Hospital (TTSH), to share their leadership insights and journeys with the AY2025/2026 batch of chief residents (CRs).

“When I look back at all the work that I’ve done in all the relationships that I’ve been lucky to be part of, and all the transformations that I’ve had to oversee as well, it is actually about the trust,” said A/Prof Wong, who is also Advisor (NHG Eye Institute) and Clinical Director (Centre for Healthcare Innovation), to the 46 newly-appointed CRs.



Photo opportunity with Prof Tham (seated, third from right), and A/Prof Wong (seated, fourth from right)



## Lessons in Trust and Communication

“If there is no trust, no matter how good the idea is, there is no change... there’ll always be resistance,” he said, and shared a memorable quote by Mr Stephen M.R. Covey (the son of the late Mr Stephen R. Covey, renowned author of “The 7 Habits of Highly Effective People”) that resonated with him until today.

Paraphrasing the younger Mr Covey, A/Prof Wong said: “Your journey as a leader, and any transformation or change you wish to make, will all move or grow at the speed of the trust that you can create.”

It was one of his earlier missteps as the newly-appointed head of department (2006 – 2016) at TTSH’s Ophthalmology Department that taught him a memorable and valuable lesson in trust.

In his attempt to streamline and improve straight-forward “bread and butter” cataract surgeries, A/Prof Wong sought to standardise the different surgical techniques, equipment, and consumables used by surgeons. However, his corporate speak about it being a “cost-cutting exercise” and about “creating a high-speed cataract factory” alienated his clinical colleagues.

“I decimated their trust,” A/Prof Wong admitted candidly, and added that he underestimated the impact of his words and directions. “I had given values which were in complete misalignment with theirs, and with my own as well.”

“I think for many of us who are clinicians, cost cutting never comes up as the first, second, or even third priority... we are always thinking about quality, safety, and maybe efficiency... Cost cutting as the first thing was completely off putting as a surgeon... and being a surgeon myself, I forgot how eponymous, strong, independent, and proud we are of our craft.”

An opportunity to implement these changes with the right approach arose when A/Prof Wong was simultaneously tasked to set up TTSH's first ambulatory cataract centre in the Ang Mo Kio (AMK) heartland. This parallel initiative allowed him to focus on reframing his message, aligning communication with his team, and building consensus rather than mandating change.

This change in approach enabled him to attain a 90 per cent agreement amongst his fellow surgeons; bringing the once "default" 27 surgical instruments (from the TTSH's Ophthalmology Department) down to 16, saving costs, and reducing the numerous variations of surgical setups that the nurses had to prepare before surgery.

"And to this day, the process still exists at the AMK centre," said A/Prof Wong proudly.

He concluded with a powerful reflection: "Your teams will look up to you with respect and trust if you show competence and character. Competence is the easy part. I think all of us will be great physicians, great diagnosticians, great surgeons better than myself... But where it becomes difficult is to demonstrate appropriate and legitimate intent and integrity, which I lost with my department during that particular period."

### **Navigating Through Complexity and Leading with Kindness**

Sharing the same sentiments, Prof Tham, who is also Assistant Dean (Graduate Programmes, Continuing Education & Training), at the Nanyang Technological University Lee Kong Chian School of Medicine, shared that leadership often involves handling sensitive situations that test both professional judgment and personal ethics.

"In your career as doctors and leaders, what is essential and non-essential can sometimes be very difficult to set apart," noted Prof Tham. "Of course, there will be absolute essentials, and also clearly non-essentials, but a lot of things fall into grey areas - essential in some contexts, yet non-essential in others." She emphasised that when navigating such complex situations, leaders must steadfastly uphold professional integrity while exercising personal compassion.

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**Your teams will look up to you with respect and trust if you show competence and character. Competence is the easy part... But where it becomes difficult is to demonstrate appropriate and legitimate intent and integrity."**

*- A/Prof Wong  
Hon Tym*



Prof Tham recounted one such experience from her earlier leadership journey as a young Assistant Chairman Medical Board (ACMB), where she was tasked to be part of an investigative team looking into professional conduct matters. The case required careful examination of institutional policies and protocols, while also considering the human aspects of healthcare practice.

The investigation challenged her on multiple fronts, requiring her to be familiar with institutional policies and healthcare protocols at the granular level – a departure from her usual leadership approach, and maintain objectivity while investigating someone she knew professionally.

"I've never studied so hard, even for my master's or doctorate," Prof Tham quipped. "I literally knew exactly which page of the policy to refer to."

"Such investigations require us to look beyond just the facts and figures," she explained. "We need to understand the context, the systemic factors, and the human elements involved, all while ensuring we uphold institutional standards."

While it was not required of her to follow up with her colleague at the end of the investigation, she decided to reach out not in her capacity as ACMB, but as a colleague.

Prof Tham explained that she wanted to provide that colleague with the opportunity to understand the situation and decision, and also to extend her support to her colleague during the difficult period.

This experience taught her the importance of maintaining kindness in leadership, especially in difficult situations. "In everything that you do, your actions, especially when you're frustrated and stressed... you can choose to be kind or unkind," she said.

Prof Tham reminded the CRs to be mindful of their communication, especially in challenging situations. "The first words out of your mouth, or even the first look on your face towards your teams or colleagues, particularly after unfavourable outcomes like a failed resuscitation or surgical complications, can end up being really unkind," she concluded.

“

**In everything that you think you do, you take action, especially when you're frustrated and stressed... you can choose to be kind or unkind."**

*- Prof Tham  
Kum Ying*





# When Medicine Meets Humanity: Learning from Medicolegal Issues



In two thought-provoking webinars in the Humanity at the Heart of Healthcare series, Dr Charmain Heah, a consultant emergency physician from Tan Tock Seng Hospital (TTSH), and Clinical Director of the Clinical and Patient Engagement Office shared powerful insights about handling medical complaints and the complexities of the current medicolegal system.

Drawing from her unique perspective as both an emergency physician and someone with a Master's degree in healthcare law, she offered valuable lessons for healthcare professionals (HCPs) at all levels.

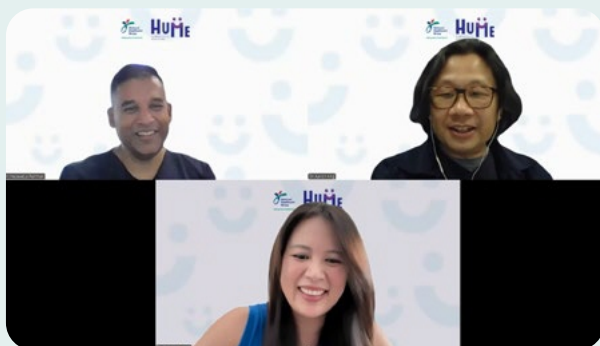
The first webinar "You Hurt Me: How is the Pain of an Adverse Outcome Experienced Differently Between Doctors and Patients?" explored the complex emotional dynamics between HCPs and patients involving medical complaints.

"I used to spend hours crafting perfectly argued replies," Dr Heah candidly shared, reflecting on her earlier days handling complaints. "I've learned that while these replies might be legally and factually sound, they often miss what patients truly need - understanding and acknowledgment."

Using a clever analogy from the TV show Frasier, she illustrated how both HCPs and patients can become entrenched in their positions. Just as Frasier refused to believe that his father accidentally stained his carpet despite evidence to the contrary, patients might reject logical explanations when emotions run high. The lesson? Logic and facts alone rarely heal emotional wounds.

Associate Professor Habeebul Rahman, Assistant Chairman Medical Board (Manpower) and senior consultant psychiatrist at TTSH, was the clinician discussant for the first webinar. He elaborated on the psychological aspects of how defence mechanisms can affect both HCPs and patients in these situations, and suggested ways in which HCPs can align themselves with the patients against the disease, instead of creating an adversarial relationship. As Dr Heah shared, "The patient feels wronged because they believe their (ordeal) was due to negligence. I felt wronged because I knew how much extra effort I had put in," she explained. "But beneath these opposing viewpoints, we were both experiencing the same human emotions."

In her second webinar "Sorry, No Cure: Does Tort Make Things Right?", Dr Heah delved deeper into medicolegal and systemic issues, and how the system of tort, whilst appearing restorative, might actually be standing in the way of what both patients and HCPs really need - healing and reconciliation. In medicine, most mistakes happen unintentionally, often with no knowledge of the negligent act. Yet the adversarial nature of tort proceedings often focuses on blame, leaving the HCP to struggle with the perception of moral fault; at the same time, the need to prove a breach of duty and causation of harm leaves many potential claimants either unable to access the justice system, or ineligible for compensation through tort. This raises questions about whether the current system serves either party well.



(Clockwise from bottom) Dr Charmain Heah during session one's Q&A with clinician discussant, Associate Professor Habeebul Rahman, and moderator, Adjunct Associate Professor Aaron Ang





Dr Heah, together with Associate Professor Nicholas Chew, Chairman Medical Board at Woodlands Health, and clinician discussant at the second webinar, discussed alternative systems such as the “no-fault” approach which has been used in countries like New Zealand and France. In such a system, patients who suffer from medical injuries are eligible for a certain degree of compensation to relieve the burden of medical errors and complications, without having to prove someone was negligent or at fault. While these systems make it easier for patients to receive compensation and encourage more open discussions about errors, they too have their limitations, such as financial sustainability, compensation limits, accountability issues, etc.

For HCPs, the key messages were clear: the need to develop better ways to communicate with patients, especially when things go wrong; maintain detailed documentation without letting it overshadow patient care; and to find ways to support each other through difficult times.

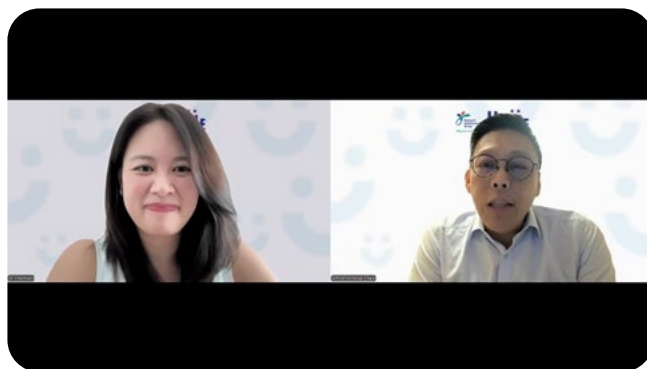
For hospital leaders, the challenge lies in creating an environment where staff feel safe to be honest about mistakes while maintaining public trust. This includes developing fair complaint management systems and finding ways to learn from incidents without creating a culture of fear.

Perhaps most importantly, the webinars served as a reminder for those in healthcare, that everyone is on the same side fighting against disease and suffering. When things go wrong, the path to resolution often lies not in proving who is right or wrong, but in acknowledging the shared humanity, and the collective effort to find practical solutions.

As one participant thoughtfully noted: "In healthcare, we're all human beings trying our best in complex situations. The goal isn't to eliminate all errors - that's impossible. Instead, we should focus on creating systems that help us learn from mistakes while supporting both patients and healthcare workers through difficult times."

“When things go wrong, the path to resolution often lies not in proving who is right or wrong, but in acknowledging the shared humanity, and the collective effort to find practical solution.”

- Dr Chairman Heah



Dr Chairman Heah (left) with session two's clinician discussant, A/Prof Nicholas Chew

### Key lessons from the webinars for healthcare professionals when facing medical complaints:

1. Recognise that beneath every complaint lies human emotion. Whether it's a grieving family's complaint letter or a patient's angry outburst, understanding the emotional context is crucial.
2. Responding to emotional situations with pure facts and logic is often ineffective.
3. Remember that both parties are often victims of circumstance – sometimes it's the disease that holds the real power, not either party in the conflict.
4. Consider the power dynamics at play. Patients often feel powerless in medical settings, which can lead to defensive or aggressive behaviour.
5. Look beyond the immediate complaint to understand underlying narratives. A patient's reaction might stem from past experiences of feeling marginalised or receiving sub-standard care.





# NHG Career Day 2025: Opportunities for All



Aspiring and practicing medical practitioners filled the halls and booths across various floors at the Ng Teng Fong Centre for Healthcare Innovation to learn more about the medical career opportunities in NHG Health from residency training to the hospital clinician scheme at NHG Career Day 2025.

This year, participants not only got the opportunity to speak to medical residents, faculty, and the human resource team from NHG Health, but were also able to hear and interact with senior leadership from NHG Health, and guest of honour, Director-General of Health, Professor Kenneth Mak.

"It is an exciting time for us (NHG Health) because we are in the process of undergoing quite a bit of change... and there are many opportunities for you to explore careers with us," said Chairman Medical Board of Woodlands Health, Associate Professor Nicholas Chew in his sharing at the "Careers in NHG" segment.

"In the last few years, what we've been trying to do is to better leverage on each other's strengths, and collaborate more with each other's work.

"And we have also been ramping up our efforts in terms of partnerships with universities, increasing our research base, as well as our presence in academia."

"Where residency training is concerned, you have our assurance that once we take you in from day one, we will really treat you like one of us. We're actually very inclusive. It doesn't really matter where you come from. What matters to us is that you're part of the team," said Designated Institutional Official (NHG Residency), Assistant Professor Llewellyn Lee, during his sharing on residency training.

"You have my assurance that what we do well is we teach you well, and also treat you well."

"What was really heartwarming today for me was that when you visit all the booths, you notice that even the most senior doctors, the HODs (Heads of Department)... they were all there to support education because I think it's something that is very, very close to our hearts and we know that's part of our duty," he said.

"And this really shows NHG Health's culture and energy... that the people right at the very top cares."



“

What was really heartwarming today for me was that when you visit all the booths, you notice that even the most senior doctors, the HODs... they were all there to support education... this really shows NHG Health's culture and energy... that the people right at the very top cares.”

- Assistant Professor  
Llewellyn Lee



Participants had hands-on opportunities with faculty and residents from NHG Health



NHG Health faculty and residents were out in full force to interact and mingle with the participants



Careers at NHG talk with senior management of NHG Health and Guest of Honour, Director-General of Health, Professor Kenneth Mak (third from right)

Click [here](#) for more photos from NHG Career Day 2025





Sister Tina See guiding the PGY1s through the PPE Assessment

## PGY1 Orientation 2025: Equipped and Supported to Care

NHG Residency welcomed its newest cohort of Postgraduate Year 1 (PGY1) doctors in April. 122 fresh graduates from NUS Yong Loo Lin School of Medicine and NTU Lee Kong Chian School of Medicine began the next phase of their medical career with an intensive week-long orientation, preparing them for their crucial first year of clinical practice.

### Insights from Senior Leadership

NHG Health's senior leaders took the opportunity to share valuable insights as they inducted these newly-minted doctors into their new roles on day one.

In his address, Professor Joe Sim, Group Chief Executive Officer, NHG Health, shared three nuggets of wisdom with the PGY1s. The first is to remember that their medical journey begins after their MBBS exams.

"There's a lot of learnings that you have to do in your journey, both from seniors who will be teaching you as well as from colleagues like nurses and allied health professionals," he said. "Because in modern healthcare, we work in a team. And this way, we are able to help you to develop (your clinical skills) even faster."

Secondly, "Don't be shy to call for help", Prof Sim stressed.

"We look at you as part of the team, and if there are any problems that you encounter... the seniors are here, and they will be able to guide you through them."

For his final point, Prof Sim encouraged the PGY1s to form friendships while working and learning as new doctors.

"And do enjoy your time here," he concluded.

Recognising that the neophyte doctors might be eager to do their best and prove themselves, Associate Professor Bernard Thong, Chairman Medical Board (CMB), Tan Tock Seng Hospital (TTSH), emphasised the importance of self-care in this noble journey of caring for patients.

"Make sure you take care of yourself, because you can only look after patients and do your best if you look after yourself," he said.



Assistant Professor Llewellyn Lee, Designated Institutional Official (NHG Residency) took the opportunity to remind the PGY1s that they are the patients' first point of contact.

"Just remember that when you're very tired (and swamped), you are the one that they (patients) look up to and depend on for care," he said.

"Yes, it's very difficult and near impossible to treat each and every patient as your own grandma or grandad... but remember this: the patient before you is someone's grandma or someone's grandad, and as the PGY1 of the team, you're probably the one who definitely has the first and most contact with them, and you represent the whole healthcare system."

"Healthcare is not a transaction... It is a relationship that we build with our patients, and in order for us to be able to provide really good care, we need to build trust with our patients," shared Associate Professor Phoa Lee Lan, CMB, Khoo Teck Puat Hospital. "The true measure of care is our patients' health as well as their well-being."



“

**Healthcare is not a transaction...  
It is a relationship that we build  
with our patients, and in order  
for us to be able to provide really  
good care, we need to build trust  
with our patients."**

*- Associate Professor Phoa Lee Lan,  
Chairman Medical Board, Khoo Teck  
Puat Hospital*

## You Are Not Alone

Both Drs Daphne Yang and Michelle Liew, PGY1 Programme Directors (PDs) at TTSH and Woodlands Health respectively acknowledged that the learning curve is steep during this transition from medical student to working doctor – who is now responsible for their patients, and they will encounter many different tests and challenges. However, both PDs reassured these new doctors that they will be supported by the company of people who will look out for them along the way such as the faculty, seniors, and programme coordinators.

"We are excited to have you with us as you embark on a momentous milestone in your professional life," said Dr Liew.

"(And) we hope to make the ride smoother... and remember that you are not alone in this journey," said Dr Yang.

"Make friends amongst your peers, and also amongst nurses and allied health professionals such as therapists and pharmacists, as you never know when they will be there to help you when you are in a pinch."

She explained that the tasks at work may at times be perceived as mundane and insignificant, but urged the PGY1s to keep the patients, and their reason for applying to medical school in mind, as it will anchor them in difficult moments.

"Lastly and most importantly, take care of yourself and be kind to yourself, so that you can care for your patients in turn," said Dr Yang.



# Incorporating Core Procedure Training in PGY1 Orientation



This is the first year that the Core Procedure Training (CPT) module is introduced as part of the TTSH PGY1 orientation. To ensure that the PGY1s are better prepared for their rotations to medical and surgical departments in their first year of work, the Ministry of Health has established a essential procedural competencies for PGY1 trainees. These fundamental core procedure skills include: the safe removal of surgical drains, chest tubes, CVP (Central Venous Pressure)/PICC lines (Peripherally Inserted Central Catheter), toilet and suture of wounds, urinary catheterisation for male patients, venepuncture, and IV cannulation.

Previously, these skills were taught to international medical graduate (IMG) PGY1s by residents and senior doctors on an "opportunistic" basis during their posting, due to resource and time constraints, shared Dr Daphne Yang, PGY1 PD, TTSH.

"We thus felt it was important to prioritise and structure such training during the orientation period for our IMGs, so that this would smoothen their learning curve in the wards as they have to grapple with other challenges, like adapting to the local institutional practices and healthcare culture," she added.

Dr Yang shared that as the inaugural run of the CPT for the IMGs (held in February) was extremely positive, the team decided to extend the workshop to the larger group of PGY1s from the local medical schools, with overwhelmingly positive feedback.

"So having to do the procedures again is kind of a very good last-minute refresher, at least right before we start work," shared PGY1 Dr Joshua Koh.

"And I think it also reinforces a bit of confidence in the new HOs (house officer) because every hospital does the same procedure a bit differently... So having that experience gives us more confidence."

Fellow PGY1 Dr Tammy Yim found the exposure to the different procedures beneficial, particularly those beyond the standard medical school curriculum.

"I think it's a very good teaser into the actual working world when we might need to use these skills or even just being aware of how to document it," she said.

"So it was nice that the whole cohort could come together to learn about it."





# Mastering the Feedback Conversation

Held in-conjunction with SHBC



7 October 2025  
(Tuesday)  
8:30AM - 1:00PM



LKC Medicine  
Clinical Sciences Building,  
Seminar Room 7-1

## PROGRAMME OUTLINE

Feedback is a vital part of teaching, learning and professional development, yet it can often feel uncomfortable or unclear. This interactive half-day workshop is designed for educators who want to build greater confidence and skill in giving effective feedback. Through group activities and guided practice, this workshop will explore feedback literacy and equip participants with effective techniques for giving feedback and navigating difficult feedback conversations.

## TARGET AUDIENCE

Clinical Educators and Teachers, including APDs, CCFMs, Clinical Instructors, Subject Leads, Posting Leads, Supervisors and Preceptors from all healthcare professions



<https://for.sg/masterfb2025>

## Registration closes on 7 September 2025

Note: This pre-congress workshop requires separate registration from SHBC. Please register if you are interested in attending.

CME/CPE points: Pending approval from SMC, SNB, SPC, AHPC

For other enquiries, please email to [hak\\_yee\\_lim@nhg.com.sg](mailto:hak_yee_lim@nhg.com.sg)



Course fees will be covered by NHG Group Clinical Education Office for NHG faculty members involved in NHG Residency and Pre-Professional Education. For cross-SI residency faculty members, the Employing SI will make the claims for cross-SI faculty appointments.

All other NHG staff and LKC Med staff will be charged \$109.00 per participant (including 9% GST). Non-NHG staff will be charged \$130.80 per participant (including 9% GST).



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