

FACE-TO-FACE



Leadership Renewal at Group Clinical Education

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Deciphering Medical Jargon

IN FOCUS



Revamping Nursing Training at Yishun Health: A 4C/ID Approach

VOICES



Balancing Between Hope and Despair - Precariousness in the Lives of Diabetic Patients After Amputation



12 SEPTEMBER 2024

Time
12pm - 2pm

Location
CHI - Centre for Healthcare Innovation
Level 2, Halls 1-3

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From left: Dr Llewellyn Lee, A/Prof Faith Chia, and A/Prof Wong Teck Yee

Leadership Renewal at Group Clinical Education

“May you all in your own way, plant seeds of wisdom, and nurture dreams.”

- A/Prof Michelle Jong

National Healthcare Group (NHG) appointed Dr Llewellyn Lee as NHG Residency Designated Institutional Official (DIO), and Associate Professor Faith Chia as NHG Cluster Education Director (Pre-Professional Education), in the recent renewal to Group Clinical Education’s senior leadership team on 1 July 2024.

Dr Lee, Senior Consultant, Department of Ophthalmology, Tan Tock Seng Hospital (TTSH), was previously Associate DIO (ADIO), TTSH. He took over the baton of DIO from A/Prof Chia, who led NHG Residency since 2018.

No stranger to residency, Dr Lee was one of the pioneer Programme Directors (PD) who helmed the NHG Ophthalmology Residency Programme since its inception from 2010 to 2022. In addition to his role as PD, Dr Lee has been actively involved in residency training as a member (since 2015) and executive committee member (since 2017) of the NHG Graduate Medical Education Committee, before being appointed ADIO in February 2022.

His leadership and commitment to medical education can also be seen through his involvement as one of four Singaporean physicians on the American Council of Graduate Medical Education-International (ACGME-I) review committee, member of the Accreditation Review

Committee in the Joint Committee on Specialist Training (Singapore). He was also the recipient of the NHG Education Leader Award in 2018, and ACGME-I Award (Physician Educator) in 2021.

“Words cannot begin to express our heartfelt appreciation for what Faith has done. Suffice to say that she has been our North Star, leading residency office by example with unwavering and steadfast principles,” said Dr Lee.

“I hope to continue what those before me have started, and as always, give my best.”

“I can think of no one better than Llewellyn to take up this role of DIO. His wide experience as a teacher, mentor and education leader, and genuine care for the residents will bring NHG Residency to new heights,” said A/Prof Chia, Senior Consultant, Department of Rheumatology, Allergy & Immunology (TTSH). While she relinquished her role as DIO, A/Prof Chia succeeded Associate Professor Wong Teck Yee, as NHG Cluster Education Director (ED).

An established educator and leader, A/Prof Chia has contributed immensely to both undergraduate and postgraduate teaching. She was active in revamping the residency curriculum, and introduced new training programmes and initiatives as PD and later as DIO. Over the years, she has won several awards including National University of Singapore Yong Loo Lin School of Medicine’s Dean’s Award for Teaching Excellence (2008) and Special Recognition Awards (2016, 2017, and 2019); TTSH’s Best Teacher (2008) and Top Ten Teachers Awards (2016); and NHG’s Teaching Award for Senior Doctors (2018).

Under her leadership as DIO, NHG Residency as an institution was reaccredited successfully for five years (2020 – 2025) by ACGME-I with no citations, and six out of seven of its Joint Committee of Specialist Training (JCST)-accredited residency programmes (between 2018 and 2020) also received accreditation with no citations.

As a strong advocate for well-being and mindfulness, A/Prof Chia spearheaded and created various support structures for junior doctors such as resident counselling services, institutional policies for crisis management, and a counselling referral guide for faculty. Resident well-being took top priority when the COVID-19 pandemic hit. She worked closely with faculty and institutions to ensure that the residents' safety and well-being were taken care of, and she also initiated the NHG Residency COVID-19 Most Valuable Player (MVP) award to recognise residents and teams who went the extra mile to assist others when COVID-19 restrictions were in place.

In recognition of her leadership and contributions to graduate medical education, A/Prof Chia received the NHG Education Leader Award in 2020, and the ACGME-I Award for Physician Leaders in 2021.

A/Prof Wong, Senior Consultant Family Physician in the Department of Continuing & Community Care, TTSH, who stepped down as NHG Cluster ED after six years at the helm shared, "it has been my privilege to work with so many committed and motivated colleagues from NHG. Would like to take this opportunity to wish everyone well, especially to Faith for taking on this new role!"

Under his tenure, NHG saw a 36 per cent increase in teaching load. A/Prof Wong and his team collaborated with the institutions' education offices and introduced initiatives such as instituting common costing models, and leveraging on technology to automate work processes, to ensure the efficient utilisation of funds, and reduce costs.

NHG also performed well for student feedback across its clinical training programmes, consistently scoring above the national average, under his leadership.

During the COVID-19 pandemic, A/Prof Wong played a crucial role in liaising with MOH and clinical schools to ensure optimal student training numbers in view of safe distancing restrictions and limited educator manpower.

"Thank you, Teck Yee, for your years of dedication to pre-professional education in NHG! You (and your humour) will be dearly missed," said A/Prof Chia.

"Teck Yee, you will always be known for your ready laugh and light-hearted nature, your kindness and your ability to pull together the fabric of a team. You have kept the PPEO (pre-professional education office) team running and on task, and I thank you sincerely for your years of service and guidance throughout your tenure," said Associate Professor Michelle Jong, Group Chief Clinical Education Officer, NHG.

"We will continue to lean on you for your educational expertise, your networks, and your wisdom. We all wish you well in your expanding job scopes in the clinical areas of NHG.

"Faith, you have brought much rigour and attention to the governance and details of running residency. Your capacity for work, genuine concern for the residents and your moral compass have steered the Residency ship well. Your impact to the programmes will be felt for years to come. I look forward to your contributions in the PPEO space, building on the foundations laid by Teck Yee. I look forward to your leadership in this changing landscape.

"(And) Welcome Llewellyn, you have big shoes to fill! But Faith has certainly pointed them in the correct direction and built you a team that will carry you forward to. Together with the team, I look forward to your leadership in bringing NHG Residency to new heights.

"May you all in your own way, plant seeds of wisdom, and nurture dreams."



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Revamping Nursing Training at Yishun Health: A 4C/ID Approach

To better equip final-year nursing diploma students with the requisite skills and competencies needed for professional practice, the Yishun Health (YH) education development office adopted a new Entrusted Professional Activities (EPA) framework based on the four-component instructional design (4C/ID) for its nursing training curriculum.

Nursing training was traditionally based on teaching and assessing different competency domains, and this often resulted in learner experiencing gaps in skills and knowledge, shared Sister Tha Zin Aung, Clinical Education Lead (Nursing), YH.

“We noticed that even though our learners acquired competence in certain skills, they found it challenging to integrate or apply competently and confidently what they have learnt, when they transition into professional clinical practice,” she said.

“And this is where the 4C/ID framework comes in handy when we reviewed and revamped our curriculum.”

“4C/ID focuses on four key aspects of a whole-task to be trained. They are the learning task, supportive information, procedural information, and part-task practice,” said Professor Yip Chee Chew, Educator Director, YH, who introduced the [framework](#) to National Healthcare Group (NHG) educators at the 2022 Education Overseas Expert Programme. “By focusing on these areas, our nursing educators are able to address gaps in the nursing training curriculum.”

Some of these curriculum tweaks include having nurses complete learning tasks by doing both recurrent and non-recurrent tasks. Non-recurrent tasks include getting nurses in the general surgery wards to make clinical judgement in modifying the wound care in a patient with different types of bed sores, or tasking nurses in renal wards to make clinical assessments of nursing needs on a patient who requires haemodialysis.

While the 4C/ID framework centres on the learner’s competencies, it also encourages curriculum designers to be cognisant of the learner’s cognitive load when learning a complex task, shared Prof Yip.

“By segmenting complex learning tasks into smaller bits, and keeping learning materials palatable, learners are able to enhance their germane load, which would enable them to refocus their attention on learning the task without having to cognitively contend with other unnecessary information,” he said.

An example would be to have the trainee nurse in the dermatological wards to focus on learning only a specific constituent skill of a particular skin cluster, done under supervision. When adding constituent skills gradually, the trainee nurse will be able to learn the skill cluster in totality and meaningfully with decreasing supervision. This strategy spaces out the cognitive load for learning, and enables holistic learning in a graduated manner.

“We are confident that with this new approach, our graduates will emerge as competent and confident professionals, practice-ready to make meaningful contributions to providing nursing care to our patients.”

- Prof Yip Chee Chew

The revised curriculum was well received by the students, with many reported that they noticed an improvement in their problem-solving abilities, planning skills, and saw greater proficiency in team collaborations. Cognitive load assessments also revealed a high level of germane load, which suggests that the learners experienced meaningful engagement with the learning activities, shared Prof Yip.

"We were very encouraged by the responses from the students in this inaugural run," said Sister Aung. "We are confident that with this new approach, our graduates will emerge as competent and confident professionals, practice-ready to make meaningful contributions to providing nursing care to our patients."

"We look forward to sharing our progress in this educational intervention as we continue to refine and improve our educational practices," said Prof Yip.



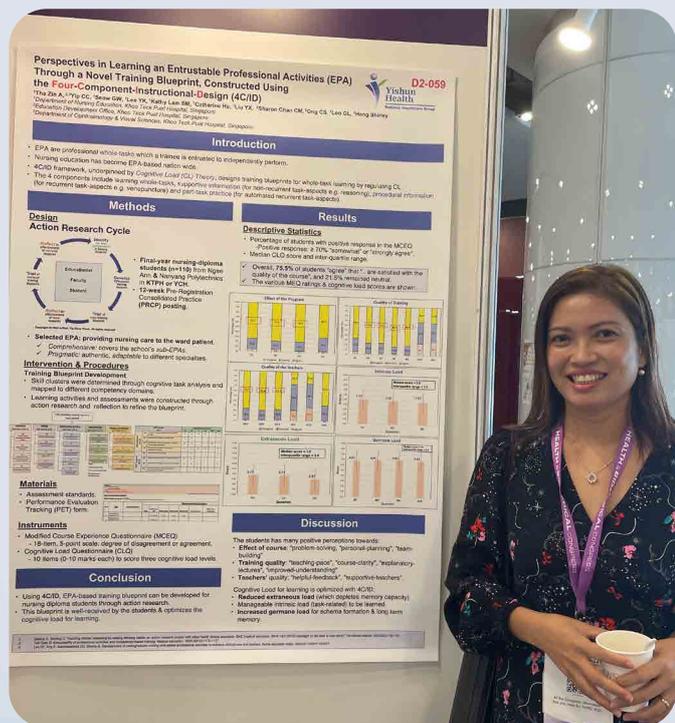
Professor Yip Chee Chew

is the Educator Director and Senior Consultant at Yishun Health. He completed a Master's degree in Health Professional Education (MHPE) from Maastricht University in 2020 with a Cum Laude designation. Prof Yip has been active in medical education research on cognition-enhanced learning such as mental rehearsal and cognitive load modulation to improve teaching and learning. He received several accolades of awards for his Medical Education Research. He received the Health Professional Education Research Investigator award (Gold Medal, 2017, 2021, 2022; Silver Medal, 2018) and Best Poster Award (2021, 2023) at the Singapore Health & Biomedical Congress. He also obtained Merit Awards (2016, 2017, and 2019) and runner-up prize for Best Poster Category (2018) at the Asia Pacific Medical Education Conference.



Sister Tha Zin Aung

is currently working as a Nurse Educator at Khoo Teck Puat Hospital, and is the Clinical Education Lead of nursing. She oversees the clinical training curriculum for all pre-registered nurses. Sister Aung actively works towards developing a structured framework for nursing students to achieve best possible learning outcomes during their clinical postings at the acute hospital setting.



Sister Tha Zin presenting the findings on the Novel Training Blueprint at the 2023 Singapore Health and Biomedical Congress



Balancing Between Hope and Despair

Precariousness in the Lives of Diabetic Patients After Amputation



In the April instalment of Humanity at the Heart of Healthcare webinar series, Dr Evelyn Chew, Adjunct Lecturer (Humanities, Arts and Social Sciences), Singapore University of Technology and Design, and Sister Julia Zhu, Senior Nurse Clinician (wound care), National Healthcare Group Polyclinics (NHGP), shared their study about the various aspects of precariousness in the lives of diabetic patients who had lower leg amputations. Pseudonyms were given to all patients who took part in the study.

"When I go out, people look at me like I'm an alien.... I'm used to assisting them (wheelchair-bound passengers), but I didn't realise that I will be in their situation," said 'Isaac' (names have been changed to protect identities), a 54-year-old former transport operations employee, and diabetic patient who recently had a below-knee amputation.

Latest statistics indicate that nearly one in ten Singaporeans suffer from diabetes, and many experience a common complication, like Isaac – diabetic foot amputation. Moreover, up to 50 per cent of diabetic patients who undergo foot amputations face wound-related complications, with nearly 80 per cent of them requiring a re-amputation within three years of the first amputation, shared Dr Chew.

"Amputation, no matter how small, is a life disrupting event with implications beyond the limb loss and the wound healing," said Sr Julia.

She shared that while most studies focus on the clinical aspects of wound healing after foot amputation, few studies have considered the experiences of patients undergoing the critical 12-month period after amputation. The aim of her study was to give voice to the patients about how they experienced life post-amputation(s).

"Latest statistics indicate that nearly one in ten Singaporeans suffer from diabetes, and many experience a common complication, like Isaac – diabetic foot amputation."

- Dr Evelyn Chew



PATIENT VOICES ABOUT PRECARIOUSNESS

The study unfolded through the experiences of nine participants, who had spoken to the study team about the various challenges in their lives following their amputations. Dr Chew used the term 'precariousness' to encapsulate their experiences, and explored various aspects in which precariousness was seen in their lives: emotional, social and financial precariousness, as well as professional identity precariousness.

Precariousness can be defined as the lack of security or stability, and the feeling of being threatened by uncertainty. And this uncertainty results in patients experiencing "see-sawing" emotions, where they continually feel the tension between hope and fear, said Dr Chew. She elaborated that for patients with fewer protective factors or had other serious health problems, had a tendency to slide towards despair or depression.

Isaac explained how he experienced emotional precariousness as see-saw emotions whenever he thought about his amputation, whilst he also harboured the hope of getting a prosthetic leg in order to continue working. "The moment I think of negative things, it pulls me down. So I have to not think of this. I have to put it on the back burner, at the back of my head and burn it... I have to look forward," he said.

“The moment I think of negative things, it pulls me down. So I have to not think of this. I have to put it on the back burner, at the back of my head and burn it... I have to look forward.”

- Isaac

Another patient, 'John', who used to be a businessman had to stop working after his amputation. This loss of professional identity was especially painful to him. "You find yourself... quite useless. Your abilities are limited now, especially if you are not earning money, especially to ... you know, how to work, and to make yourself useful," he shared.

Patients also described the perceived social stigma of amputation, and how this often resulted in social withdrawal. This was exemplified by Isaac's quote when he mentioned how he thought that people stared at him because he was now in a wheelchair.

Encouragingly, the study team also found that some of the patients had positive (protective) factors that helped them stay hopeful, and finding alternate ways to maintain some form of identity. These positive factors included family or friends who encouraged them to continue with their social lives. For 'Ayesha', one major reason to come out from social withdrawal was because her husband was competing in a bowling tournament, and she wanted to show her support.

As John recovered, he took on a job as a Grab driver, and he told the study team that "while I was driving, even though the income was very low, but (sic) it was a little bit of a satisfaction that you're (getting from) performing a service..."



A CALL FOR HOLISTIC CARE

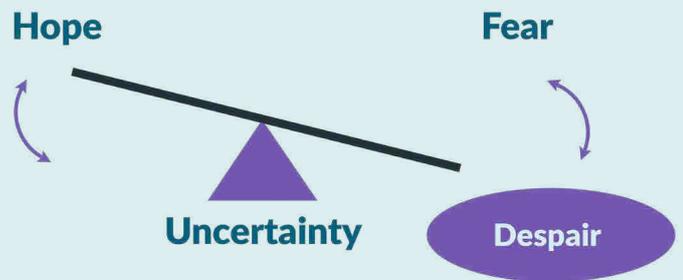
Moderator, Dr Lee Eng Sing, Senior Consultant Family Physician, and Principal Clinician Researcher at NHGP, shared that this study showed him the different ways in which his patients could be feeling despair, and called upon clinicians to be sensitive to their patients' psychological and social needs, aside from their medical condition(s).

"In primary care, we talk about the important forces being the primary care of contact, coordinated care, collaborative care with other agencies," said Dr Lee, who is also the Director of Primary Care and Family Medicine Research Programme in the Nanyang Technological University Lee Kong Chian School of Medicine.

He urged fellow clinicians to identify which of the "forces" affects the patient more, and to help as much as possible.

"And if we can't, then we have to approach social services or even their own relatives, their friends, to support them..." Dr Lee said.

"So without really knowing the patient well, there's no way that we can do that... We just need to be very aware, very open, and to be able to pick up what's the thing that affects them."



The "emotional see-saw"

Read the full study here:

"Between hope and despair: experiences of precariousness and precarity in the lived experiences of recent diabetic amputees in primary care"

By Evelyn Chew, Mary Lee, Bernadette Bartlam, Ling Jia Goh, Lijuan Dong and Xiaoli Zhu.

Discover Social Science and Health, 2024, Volume 4(5)

[Between hope and despair: experiences of precariousness and precarity in the lived experiences of recent diabetic amputees in primary care | Discover Social Science and Health \(springer.com\)](https://www.springer.com/journal/11019/issue/4-5)



A photo opportunity with the SPs and team from TTSH PPEO

Deciphering Medical Jargon

While the use of medical jargons serves as a universal language for healthcare professionals when diagnosing conditions and ailments in patients, too much of it often causes fear and anxiety in patients as they struggle to make sense of their condition(s) amidst a flurry of medical lingo (which they may not understand) being 'thrown' at and around them.

A 'Deciphering Medical Jargon' training session was organised for Simulated Patients (SPs) by the Tan Tock Seng Hospital (TTSH) Pre-Professional Education Office (PPEO) on 25 October 2023, to educate them on various medical terminologies and abbreviations, and why they are being used in the clinical environment.



Advanced practice nurses Jamie Lim and Xanthe Chua setting the context for the use of medical jargons in the clinical environment

"The intent is to ensure that the SPs are aware that the learners are over-using the jargons during the role-playing training sessions, so that they can provide the appropriate feedback to the learners," said Ms Shalimar K Ramirez, Assistant Manager (TTSH PPEO). "We hope that this will help our learners be more cognisant of their usage of medical jargons when they communicate with their patients."

A mixture of serious and fun segments was incorporated into the one-day training session to make the complex concepts palatable for the SPs.

A basic theory session was conducted by Advanced Practice Nurses (APN) Jamie Lim and Xanthe Chua to set the context regarding the use of medical jargons in the clinical environment. They provided the SPs with an overview of medical jargons, why healthcare workers use them, and even answered the queries that the SPs had on the topic.

Fun segments such as modified versions of Taboo and The Red Riding Hood game were introduced to familiarise the SPs with some of the more common medical terminologies that they may encounter during their role-playing assignments.

And to illustrate the importance for healthcare professionals to communicate in layman terms to their patients, two rounds of role-play (same scenario but different approaches) were conducted for the SPs at the end of the session.



Familiarising common medical terminologies through fun and games

"We hope that this will help our learners be more cognisant of their usage of medical jargons when they communicate with their patients."

- Ms Shalimar K Ramirez

The first had the doctor communicate to the patient (played by an SP) using medical jargons, and the other had the doctor communicating in layman terms. The SPs agreed that they easily understood the doctor in the latter round than the one filled with medical jargon.

The training session was well received by the SPs, with many of them expressing that they were appreciative of the APNs sharing their knowledge, and that the session was informative and relevant to their work as SPs.



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PLENARY SPEAKERS



Prof Michael Kidd

Professor of Global Primary Care & Future Health Systems, Nuffield Department of Primary Care Health Sciences, University of Oxford, UK; Director of the Centre for Future Health Systems, University of New South Wales, Australia



Prof Francesco Landi

Head of Department of Aging, Orthopedics & Rheumatological Sciences – Fondazione Policlinico; Universitario "A. Gemelli" IRCCS, Università Cattolica del Sacro Cuore, Italy



Dr Niamh Lennox-Chhugani

Chief Executive and Director of Research, International Foundation for Integrated Care, UK



Mr Chang Sau Sheong

Chief Technology Officer/ Deputy Chief Executive, Government Technology Office and Government Digital Products, GovTech

PROGRAMME HIGHLIGHTS

Day 1: Improving Years of Healthy Life

10 Oct, Thu

- Invisible & Enduring Scars of Lifetime Adversities In Singapore: Prevention, Management, & Mental Health Consequences
- New Frontiers in Diabetes: From Care to Community
- Navigating Obesity's Impact, Management, & Prevention

Aging Well In The Golden Years

- Cancer – Advances In Screening & Management
- Conversations around Falls, Frailty & Osteoporosis
- Early Detection & Management of Cognitive Impairment

Day 2: Health & Social Care Integration & Population Health

11 Oct, Fri

- Integrating Health & Social Care
- MIC@Home – The Future of Delivering Acute Care Beyond Hospitals
- Patient Empowerment: Unlocking the Transformative Potential of Technology

Enablers For Care Transformation

- Clinical Informatics & Data Analytics For Population Health
- Preparing The Healthcare Workforce For The Future
- Unleashing the Power of Value-Based Care: A Collaborative Workshop to Add Value to Years of Healthy Life!

Navigating Uncertainty in Patient-Centered Care: An NTU Medical Humanities Satellite Conference

Day 3: Primary Care Academy GP Symposium

12 Oct, Sat

(Venue: LKCMedicine, Clinical Science Building)



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