

IN FOCUS



Gen Zs - Working with the Next Generation of Healthcare Professionals

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Gen Zs

Working with the Next Generation of Healthcare Professionals



With more and more Generation Zs (Gen Zs or Zer) entering the workforce, it is inevitable that there will be misunderstandings and mismatches of expectations between these neophyte employees and their senior colleagues.

At the 2023 Singapore Health and Biomedical Congress (SHBC), education experts from Nanyang Technological University (NTU) (Ms Malar Palaiyan and Dr Preman Rajalingam), and NHG Education (Dr Winnie Teo and Associate Professor Wong Teck Yee), shared their insights of their interactions with Gen Zs.

In the second of a two-part series, the speakers shared how senior colleagues in the workforce with a better understanding of their viewpoints, concerns and anxieties (shared in part 1), can help new working professionals better assimilate into the work environment and grow professionally.

WHAT DO GEN Zs VALUE?

“They (Gen Zs) are entering the healthcare workforce, and are currently undergoing training...,” said talk moderator, Associate Professor Wong Teck Yee, NHG Cluster Education Director (Pre-Professional Education). “And they will enter a multi-generational workplace with different values, beliefs, and lifestyles.”

He believes that having an understanding of how the Gen Zs perceive or want from work, coupled with an employer, team, or institution that is adaptable to the Gen Zs’ values and concerns will attract and even retain them at the workplace for the long term.

So what do Gen Zs want (or value) in a learning or working environment?

“They want authenticity, interactivity, personalisation, meaningful use of technology, and diverse perspectives in their learning environment,” said Dr Preman Rajalingam, Director (Centre for Teaching, Learning and Pedagogy), NTU, who has more than 20 years of teaching experience under his belt.

Gen Zs want authentic learning experiences that are deeply rooted in real world examples,

based on things that are actually happening, and not theoretical constructs.

They would like the learning process to be conducted in a dynamically interactive environment, where they can get hands-on experiences, and participate in discussions. And not attend face-to-face didactic lessons, which they could “easily get the same information by watching the teacher speak in a video”, shared Dr Preman.

They prefer to have a more tailored, personalised learning experience, that allows them to navigate the curriculum based on how they would like, and not “exactly the way the teacher intends for them to”, with the seamless integration of digital technology.

And lastly, they value diversity of perspectives; having more inclusive and multicultural viewpoints.



Ms Malar Palaiyan

WORKING TOGETHER WITH GEN Zs

“The whole (work) culture is changing, and I think it is about balancing the needs of the team, and the clients (patients) that you are serving,” said Ms Malar Palaiyan, Head (University Counselling Centre), NTU.

As the workplace becomes increasingly multi-generational, with differing mindsets about work, all four speakers and moderator agreed that it is important to have conversations about workplace expectations.

One such important topic to talk about is about hierarchy.

Hierarchy exists everywhere, and it is usually interpreted in a negative light, said Ms Malar. “I’d like to offer a different perspective to consider.

“Hierarchy has a role to play especially when it comes to (patient) safety.

“Sometimes the responsibility of decision making is very heavy on a young person,” she adds. “It can be quite detrimental to him/her when he/she makes a wrong decision... they may lose confidence if it happens.



Speakers (from left): Ms Malar Palaiyan, Dr Preman Rajalingam, and Dr Winnie Teo

“So don’t think of hierarchy as something bad.”

Echoing Ms Malar, Dr Winnie Teo, Deputy Director (NHG Education), feels that seniors have the responsibility to ensure that the rationale for certain practices such as hierarchy “serves a purpose”, and explain why certain existing practices are important in the working environment.

She suggests that one way to enable these difficult, and at times “controversial” conversations at the workplace is through coaching and mentoring.

Why these two approaches?

Coaching and mentoring are particularly suited to the needs of the Gen Zs, as the learning needs can be presented in a customised and “a la carte” manner, said Dr Teo.

Coaching offers a supportive relationship, where the coach guides and empowers the coachee towards solutions and action-driven outcomes. This can be done in a short period of time, each time focusing on specific areas of improvement or skill. Once the desired expertise is achieved, the coaching relationship may cease.



Dr Winnie Teo

Mentoring, however, is more about cultivating a supportive, long-term relationship. The mentor’s role continues for a longer period of time, with the focus on the overall development of the mentee. The areas of mentoring and development are not only limited to a specific skillset or expertise in the professional domain; it can also be in the personal domain as well.

This way, it aids the “Gen Zs to critically evaluate where they are and decide on the path that they want to take,” Dr Teo said.

She believes that coaching and mentoring create opportunities for both Gen Zs and their seniors (mentors or coaches) to better understand each other’s roles, perspectives, expectations at the workplace, and most importantly to “build the bridge together, and find some common middle ground”.

Dr Teo also urged for senior colleagues to take the effort and explain to the Gen Zs “why they matter, and where they can contribute”, to show that they care not only about their professional development, but also their personal concerns and wellbeing.



Dr Preman Rajalingam

Residency Leadership Talk Part 3: To Empower and Trust

Thirty-nine Chief Residents (CR) were inducted into their new leadership role during the National Healthcare Group (NHG) Residency Chief Resident Induction Programme, held in July 2023. These young new leaders nominated by their peers and juniors, will represent them as their voice (to the faculty, department and organisation), and will also oversee resident welfare, facilitate teaching activities, on top of their own training and clinical duties.

Three distinguished speakers – Adjunct Professor Lee Bee Wah, Emeritus Professor Rajendran Kanagasuntheram, and Associate Professor Yong Keng Kwang – were invited to share their leadership experiences and perspectives with these budding young leaders as they kick-start their leadership journeys.

In the final of a three-part series, guest speaker, A/Prof Yong, Group Chief Nurse and Chief Wellness Officer, NHG, highlighted the positives of empowering others, and the importance of cultivating and giving trust.



EMPOWERMENT

As the delivery of care becomes increasingly complex, a well-informed and cohesive multidisciplinary team is needed to ensure that patients receive appropriate care in a timely manner.

A/Prof Yong noted that the empowerment of all team members is crucial for this to happen, and is an essential trait that leaders should aspire to cultivate.

He believes that empowerment fosters a sense of ownership in one's area of work, which may eventually pave the way for team members to lead in some areas of their work, and even create opportunities for them to influence work processes or policies that affect them.

However, he cautioned that implementing this "shared governance" or "collective leadership" approach as leaders is no easy feat, due to the many challenges that need to be addressed, such as juniors or team members not having the confidence to voice out or make decisions, and the lack of trust leaders may have.

A/Prof Yong shared that he noticed some of the non-medical healthcare professionals (e.g. nurses under his leadership) "still suffer from the elephant rope (syndrome)". Many still lack the confidence, or hold on to the belief that their opinions do not hold the same weight as their fellow team members - especially more senior members or doctors, despite having the relevant experience and clinical knowledge. This is similar to the analogy of the elephants who grow up with a restraining rope tied to their leg, conditioned to think that they are unable to break free (even though they have grown physically bigger and stronger) from the small rope that they are bound to.

This would often result in the junior or fellow team member(s) constantly needing to seek approval and confirmation from those in supervisory or leadership positions before "doing anything", he said.

In this instance, A/Prof Yong feels that leaders should encourage the mantra of "asking for forgiveness, and not for approval", which would

"Empowerment fosters a sense of ownership in one's area of work, which may eventually pave the way for team members to lead in some areas of their work, and even create opportunities for them to influence work processes or policies that affect them."

A/Prof Yong Keng Kwang



not only empower junior members, but also encourage them to take greater initiative and ownership over their work.

However, he caveated that leaders need to make it clear that when team members are empowered with the responsibility or "freedom" to make decisions, it does not mean that when a mistake arises, they can simply seek "forgiveness" without bearing the consequences.

"You do need to know that when things go wrong, there will still be some expectation of doing things right," said A/Prof Yong.

"There will be lessons learned, and you (who is empowered) have to bear with it (the mistakes made), because this is a price for being empowered."



TRUST

A/Prof Yong shared that it is also one of the reasons why leaders fear empowering their team or subordinates.

"The fear that the (empowered) people who make decisions do not consider the impact well enough," he said. Hence, their "fear of letting go (the decision-making responsibility)".

This fear that leaders experience can be understood as the "lack of trust", noted A/Prof Yong. This also manifests in various forms such as leaders perceived as being closed (to suggestions), unwilling to share information, or not listening or addressing issues.

From the lessons learnt through his leadership journey and speaking at many townhalls, A/Prof Yong observed that the choice of topic and amount of information shared with more junior team members determine if it attracts their attention, or reinforces their (usually negative) perspective of leadership or management.

"Often there is an inclination for leaders to want to share large strategic plans and goals, and while these topics are important, they do not appeal to the attendees", he said. "If you want to talk about strategy, settle the hygiene issues (first)."

Not addressing "hygiene issues" such as poor policies, lack of welfare, job dissatisfaction, etc., would usually give the perception that the leaders are disinterested in the issues that matter to the ground. Coupled with the reluctance of leaders to share information for the fear that "people don't understand" or "it will stir problems", further reinforces the perception that leaders are closed off.

A/Prof Yong added that it does not help when leaders say that they are "open to feedback", but the "kind of answer" that they give (usually unfavourable or ambiguous) – due to circumstance or difficulties – tends to say otherwise.

"Since it (issues) will go through the grapevines, I rather openly share and address it," he shared. "Yes, some of the questions make you feel very uncomfortable..."

"But I feel that when we are more open to people, at least to our colleagues and our staff, they can understand why things cannot be done."

"And when we are open with them, more often than not, they end up thinking about solutions together with you... (and) I take comfort in that."



Patient Stories and Why They Matter

Dr Michelle Chiang, Assistant Professor and Coordinator of the Medical Humanities Research Cluster, School of Humanities, Nanyang Technological University, spoke about the value of patient stories in the final instalment of the Humanity in the Heart of Healthcare (HHH) series for 2023, organised by the NHG Education Research team.

The webinar brought to the fore two contrasting ways in which 'patient stories' are thought of. To a clinician, patient stories are thought of as the patient's 'illness script', which the clinician listens to in order to sieve out clinically-relevant information with the aim of reaching a diagnosis. Dr Chiang however, proposed that patient stories may also function as a way for healthcare professionals (HCP) to engage with their patients to better understand their patients' lived experiences, and ultimately, to understand themselves.



Clockwise from top left: Drs Michelle Chiang, Joyce Yap, Winnie Teo, and Joanne Kua



“As doctors, do we hear the words, or do we listen to the stories behind the words?”

Dr Joanne Kua, Moderator

The webinar was moderated by Drs Joanne Kua, Senior Consultant (Department of Geriatric Medicine), Tan Tock Seng Hospital (TTSH), and Joyce Yap, Consultant (Department of Continuing and Community Care), TTSH, who related stories from their own patient encounters to draw parallels between their day-to-day work and Dr Chiang's research.

Dr Kua recalled a geriatric patient who was fearful of dying. Dr Kua tried to help her by finding out from clinical literature how best to help her, but reflected that in retrospect, she could have listened more closely to her patient's story to better understand her encounters with death. As Dr Kua recounted, “As doctors, do we hear the words, or do we listen to the stories behind the words?”

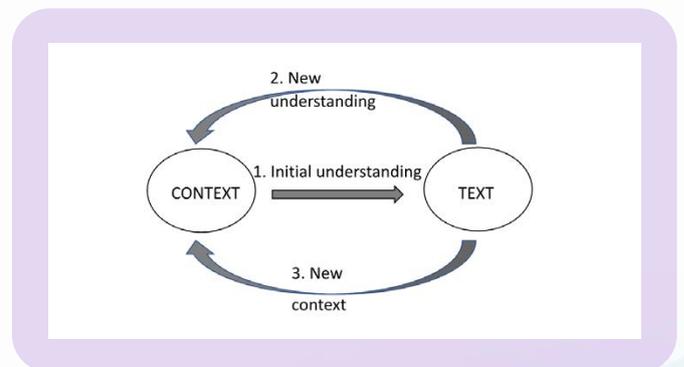
Dr Chiang elaborated that the root of the word “patient” is “to bear”, referring to anybody who bears the effects and consequences of the illness. This would include not just the patient, but the caregivers and even the HCPs. Even as the patient and HCP are drawn together in a dyadic relationship, she also pointed out the concept of “otherness” in this relationship, which connotes difference, unfamiliarity, and sometimes, even discomfort. Despite this, HCPs are called everyday, to care for people who are unfamiliar to them, whom they do not know beyond the confines of the clinic or ward.

Dr Chiang stressed that noticing the “otherness” when engaging with patients' stories enables HCPs to know more about the individual's story, and acknowledge these differences or unfamiliarity. This will in turn help HCPs expand their own understanding of the world by broadening their mental models and perspectives. An important pre-requisite to this, is that the HCP must keep an open mind, she said.

“A person who wants to understand a text (must) be ready to be told something by it,” Dr Chiang said, quoting German philosopher Hans Georg Gadamer.

She also highlighted that one must be aware of one's own biases and pre-conceptions. So, when one is listening to someone else's story, one is ready to have his or her own opinions challenged by the story. And by asking “how can I help you?,” one thus opens up to the opportunity to re-consider his or her perspective(s), when “something new is added, something different”, said Dr Chiang. “By being aware of the differences, the story never mirrors one's own perspective, and instead adds to it.”

She illustrated this with the 'Hermeneutic Circle of Understanding'. This (Hermeneutic Circle) method encourages one to understand a story (TEXT) against a background of cultural, historical, and personal context (CONTEXT) therefore adding a new understanding to one's perspective.



In the era of patient-centred care, attending to patient stories is often valued as a way to build empathy and achieve better patient satisfaction. Dr Chiang believes that engaging with patient stories offers benefits to the HCPs, as a way of enriching their experience and helping them understand themselves better, whether as people or as clinicians.



NHG and MOH Host Tsinghua University Master's Students

27 Master's students from the Tsinghua University Institute of Hospital Management (IHM) were in Singapore for a three-week Healthcare Management programme (from 15 January to 2 February) to learn about Singapore's healthcare system.

Spearheaded by National Healthcare Group (NHG) College, the three-week programme provided the students with a glimpse into Singapore Healthcare, NHG's institutions and its approach to population health and patient care, as well as research, innovation, technology, and education in healthcare. Throughout the programme, the students also had the opportunity to interact with senior healthcare leaders in Ministry of Health (MOH) and NHG, including Minister of Health Mr Ong Ye Kung, MOH Deputy Secretary (Policy) Ms Jasmine Lau, and NHG Group CEO Mr Joe Sim.

The three-week programme was offered to Tsinghua University following a request from Founding Chairman, Tsinghua Medicine, Professor Wong Tien Yin, who shared that

IHM's leadership felt that Singapore would be a valuable learning experience for their students, as Singapore's public healthcare system is like China's in its philosophy; where it is also facing similar challenges of ageing population, and rising healthcare costs.

Professor Benjamin Seet, Deputy Group Chief Executive Officer (Education and Research) & Group Chief Research Officer, NHG, shared that he did not hesitate when approached to host the students.

"Singapore has an efficient healthcare system with some of the world's best outcomes. There are valuable insights and practices we can share that could benefit populations in other parts of the world," he said.

"Although we don't have all the answers, particular with the evolving challenges facing health care, programmes such as this allow a peek into our system using fresh eyes, and through the many discussions with young, inquisitive minds, seed ideas as to how we may do better."



Wefie opportunity with Minister Ong Ye Kung

In the first segment of the programme, students were given an overview of Singapore's healthcare landscape, national strategies, and policies, where they were exposed to healthcare financing and manpower planning, and introduced to successful ageing and health technology assessments. The students were also given presentations about differences between health systems in Singapore, China, and Hong Kong.

In the second segment, the students were introduced to NHG's approach of caring for its patients and population; and how NHG integrates as a cluster, and collaborates with its partners in supporting the Healthier SG initiative. The presentations covered primary care, community care, post-discharge care and palliative care, as well as operations of a tertiary hospital. To bring to life the teaching, the students went on site visits to various NHG's institutions such as tertiary hospitals; national centres for infectious diseases, mental health, and dermatology; sub-acute care facilities, and polyclinics, to name a few.

And in the last segment, various presentations were conducted to bring the students through clinical research and innovations; how care transformations are enhanced by digitalisation and national electronic medical records system; the importance of data protection and cybersecurity; as well as how NHG trains and develops doctors and healthcare professionals; and concluding with NHG's partnership with Nanyang Technological University Lee Kong Chian School of Medicine.

Associate Professor Michelle Jong, Group Chief Education Officer, NHG, also brought the students through a session on reflective practice to aid them in better retaining and deepening what they have learnt during the past three weeks.



Touring the heartlands with team members from the NHG Education Office

The students had an engaging session through a fireside chat with Minister Ong and Mr Sim at the end of the programme. Representing their class, students Ms Qi Xiaoyang and Ms Yu Xiru shared that they were impressed by their experience in Singapore, the local food, the beautiful skyline and shoreline, but most importantly, the patient-centred, preventive-care oriented approach of Singapore's healthcare system, reflected by the well-managed NHG.



The three-week programme culminated with a fireside chat with Minister Ong Ye Kung and NHG GCEO Mr Joe Sim

Ms Qi highlighted that she was particularly impressed by Singapore's efficiency and easy access to healthcare for its population, and recounted how seeing a nurse perform a rehab session with an Alzheimer patient, while gently holding her hand throughout the session, allowed her to experience the Hippocratic oath in action, "To cure sometimes, treat often, and to comfort always".

On behalf of the students, they expressed their gratitude to NHG and MOH for giving them this enriching experience in Singapore which will guide them to find better solutions for China, as well as paving the way for more interactions and collaborations between both countries.



NHG Orthopaedic Surgery and Geriatric Medicine Residency Programme Community Engagement Day 2024

A Morning of Songs, Laughter, and Chatter

It was a morning filled with nostalgic songs, excited chatter, and stapling clicks, as 37 junior doctors and faculty from National Healthcare Group (NHG), engaged some 40 seniors from the Society for the Aged Sick (SAS) in karaoke, a game of bingo, and Chinese New Year handcraft, as part of NHG Orthopaedic Surgery Residency Programme's annual Community Engagement Day (CED), held on 6 January 2024.

"This (CED) is a wonderful opportunity for residents and faculty to come together and give back to the community. We hope that it will allow a more personal engagement with a particular group of patients (seniors) whom we see often in our practice," said Dr Gerrard Gan, NHG Orthopaedic Surgery chief resident, who spearheaded the event.

Every year, the programme looks for different ways to engage the community, such as blood donation drive, walk-run-cycle fundraiser among others. Upon deciding that the programme will engage nursing home residents this year, Dr Gan and his team cast their net across Central and North Singapore, of which NHG is the Regional Health Manager, in search of suitable nursing homes and hospice care facilities to partner.

"The opportunity to partner with SAS nursing home presented itself, and we took it... (and) since we are involving nursing home residents this year, we thought that it might be good to involve our GRM (Geriatric Medicine) colleagues," he said, adding that this is also the first time the CED was co-organised with NHG Geriatric Medicine Residency Programme.



"We hope that it will allow a more personal engagement with a particular group of patients (seniors) whom we see often in our practice."

Dr Gerrard Gan



At the end of the event, Dr Muhammad Farhan Mohd Fadil, Programme Director (NHG Orthopaedic Surgery Residency) closed with these words of gratitude – "thanks everyone (seniors) for allowing us to be part of your day, I hope you had fun with the crafts, the bingo, the singing... and I hoped that you had fun engaging with our NHG colleagues".

"And to all my colleagues from Orthopaedics and GRM, thank you for spending your Saturday morning to be here with us, I think it's been very meaningful to you and the (SAS) residents," he added.



Bingo time!

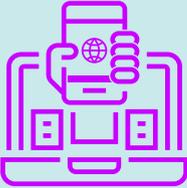
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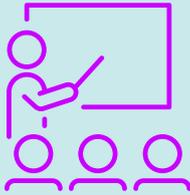
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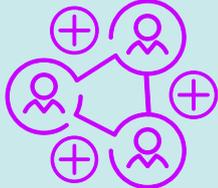
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OTHERS

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