

## IN FOCUS



## FACE TO FACE



NHG Residency: Going Beyond Clinical Training

## HOMER



Discovering the "Formula" to Resilience



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# ‘Psyched’ About Residency: Reflections of a Pioneer Programme Director, Associate Professor Chiam Peak Chiang

In the third of a four-part NHG Education 10th Anniversary (edu10) series, we spoke to inaugural NHG Psychiatry Residency Programme Director, Associate Professor Chiam Peak Chiang, on being tasked to helm not just a new residency programme, but a new national residency programme.



A/Prof Chiam conducting a talk on the National Psychiatry Programme during the 2011 NHG Residency Career Day.

**Hi A/Prof Chiam, how were you approached to be the Programme Director (PD) for the psychiatry programme?**

I was just told to do it (laughs). Prior to that, I was in charge of the basic specialty training (BST) and advanced specialty training (AST) Psychiatry Specialist Training, then the Seamless Psychiatry Training in IMH. So I suppose I was the most “suitable” PD candidate when Psychiatry Residency was starting.

**What was your initial reaction when you were asked to be the Programme Director?**

I was quite happy and excited to be given the opportunity. Residency training was totally new to Singapore and there was so much to learn.

**What were some of the tense moments/challenges that you encountered during your time as PD? And how did you overcome them?**

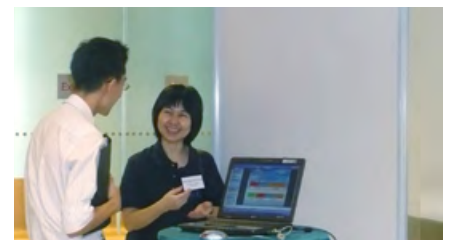
The first ACGME-I (Accreditation Council for Graduate Medical Education International) accreditation was quite stressful as we had to prepare almost everything from scratch.

The NHG GMEC (Graduate Medical Education Committee) worked very hard to prepare us, and made sure we fulfilled all the requirements. And there were a lot of cross-sharing of best practices amongst the different residency programmes in NHG.

There was also a vast difference in posting requirements from the previous BST (Basic Specialist Training) / AST (Advanced Specialist Training) and Seamless training to residency training. It was challenging to explain the requirements to the various stakeholders, as there were (still are) some reservations about switching from six-monthly postings to three-monthly rotations (which are comparatively short), and the effect it had on service delivery as the residents move quickly through the rotations. But I suppose that wearing the hat of a department clinical chief at that time helped too because I knew the issues that the departments faced and how to address their concerns.

**Share with us some of the most “fun” or exciting moments as PD?**

The exciting part is seeing how the residents grew and matured over the years, and many have become competent specialists and teachers.



A/Prof Chiam (right) speaking to a potential candidate at the 2010 NHG-AHPL Career Symposium.

**What was your most proud achievement as a PD?**

When the first batch of residents finally graduated.

**We understand that the late A/Prof Vijayan Appasamy was part of the first five programme directors in NHG Residency. Share with us some of the most memorable moments that you had with A/Prof Vijayan.**

My impression of him is that he was very passionate about residency training. He contributed many good suggestions during our discussions among the PDs on how to improve the training.

**What’s the advice you would give to the current team of PDs?**

Be empathetic; it is not easy being a resident.

Associate Professor Chiam Peak Chiang is the Vice Chairman Medical Board (Education) at Institute of Mental Health. As a clinician, she works in the Department of Geriatric Psychiatry. As an educator, she oversees undergraduate and postgraduate psychiatry education, and is also involved in the training of general practitioners in mental health.



Photo credit: Institute of Mental Health



# NHG Residency: Going Beyond Clinical Training

Over the past decade, National Healthcare Group (NHG) Residency has trained many medical and pharmacy residents. NHG's clinician educators constantly reshape, refine and hone the way they teach and train their learners. Here is a look at what makes residency training unique at NHG.



## ▶ Testing Beyond Surgical Skills: NHG General Surgery Residency Programme

Since 2015, NHG General Surgery (GS) Residency Programme has implemented a novel multimodal selection process which requires medical residency applicants to undergo situational tests and dexterity tests, in addition to traditional interviews.

Realising that traditional selection methods did not allow for a comprehensive assessment of the applicants, former NHG GS Residency Programme Director, Dr Sarah Lu devised this multimodal selection process to assess how the applicants respond when challenges arise or when caught in unexpected situations.

“A situational test is employed mainly to test certain domains, not easily assessed with traditional interviews or transcripts,” said Dr Terence Huey, Programme Director, NHG GS Residency Programme.

The initial iteration of the selection process leveraged on the principles of the competitive cooking reality television show, Masterchef, which had the GS residency programme applicants bake cakes, soufflés, etc., to assess their dexterity, ability to follow instructions and adapt, and teamwork competencies.

While the multimodal selection process has since evolved into a different iteration, its essence has been retained, shared Dr Huey. “While we are no longer cooking, we are still having situational tests using other tasks for selection, which is probably one of the hallmarks of our programme.”



## ▶ Going Beyond the Pharmacy: NUS-TTSH Ambulatory Care Pharmacy Practice Residency Programme



The NUS-TTSH Ambulatory Care Pharmacy Practice Residency Programme, offered by the National University of Singapore (NUS) Department of Pharmacy in conjunction with Tan Tock Seng Hospital (TTSH), is designed to provide training for pharmacists seeking to advance in areas of pharmacy practice in ambulatory care.

Launched in 2014, the one-year programme equips pharmacy residents with a broad range of ambulatory care clinical skills, that would enable them to initiate and adjust medication for drug optimisation for chronic diseases, helm pharmacist-managed clinics, and provide continuity of care when they graduate.

“The curriculum for Ambulatory Care Pharmacy Practice residents is very much focused on pharmacist-managed clinics where the programme advocates continuity of care. Residents get to meet the same patient(s) and follow-up on that patients’ care for one year, and this enables residents to function independently as practitioners,” said Ms Kng Kwee Keng, Assistant Programme Director, NUS-TTSH Ambulatory Care Pharmacy Practice.

“Residents will be able to acquire a broad range of clinical skills to meet the healthcare needs of the country in an ambulatory care setting and prevent hospital admission. Furthermore, through the academic setting (offered by Department of Pharmacy at NUS in conjunction with TTSH), residents will also develop skills required for becoming an effective clinician teacher.”

## ▶ Looking Beyond Hospital Walls: NHG Residency Community Engagement Day

In 2015, NHG became the first Sponsoring Institution to incorporate community engagement as part of its residency orientation for residents (junior doctors) starting their residency training to become specialists.

The goal is to provide the residents with an opportunity to understand the patients in their community and living environment, outside the clinical setting. “The idea is to get the residents to engage and understand the social situation and difficulties that these people face, and not what their medical problem is,” said Associate Professor Nicholas Chew, Group Chief Education Officer, NHG.

Community engagement day is now held on a yearly basis, and it has seen NHG residents engaged with senior citizens, conducted house visits and community surveys, as well as interacted with migrant workers at the Mandai Westlite dormitory.



**2015 NHG Residency Community Engagement Day: NHG Residents interacting with seniors at the Asian Women’s Welfare Society Community Home**



2018 NHG Residency Community Engagement Day: NHG Residents conducting community sensing surveys on-site in Woodlands



2019 NHG Residency Community Engagement Day: NHG Residents bonding with the foreign worker community

Click on the year below to read more about what the residents did during the past Community Engagement Days:

[2016](#) [2017](#) [2018](#) [2019](#)

## ▶ Treating Beyond In-patient Care: NHG Internal Medicine Residency Programme

In 2019, NHG became the first and only Sponsoring Institution to offer the Medicine in the Community elective as part of its Internal Medicine (IM) Residency Programme training curriculum.

Pioneered in collaboration with the Tan Tock Seng Hospital (TTSH) Continuing and Community Care Department, the month-long elective aims to expose residents to community healthcare services, and equip them with the requisite skills to manage patients in the community, so that appropriate medical and psychosocial interventions can be put in place to enable ageing and living well in the community.

Working in an inter-professional team, the residents head to the community e.g. nursing homes, residential homes, etc., to provide care to patients who are home or bed-bound, and learn the appropriate medical and psychosocial interventions that would enable the patients to age and live well in the community.



Dr Faith Chia, Designated Institutional Official, NHG Residency, who initiated this elective during her tenure as Programme Director for NHG IM Residency Programme shared that it would be mutually beneficial to all parties if the patient can receive care in his or her community, where the support from community care services, and the closeness of the patients' families and friends would aid in the recovery process. The reduction in readmissions meant that physicians can allocate more attention to critical and acute cases in the hospital.



To learn more about our residency programmes, please visit:

<https://www.nhgeducation.nhg.com.sg/nhgresidency>

# Discovering the “Formula” to Resilience

Self-awareness, reflection, continued evolution (transformational growth), and not shying away from stressors can help palliative care clinicians (PCCs) better cope with burnout from the emotional and existential distress associated with their jobs, says researchers in a 2020 study published in the *Journal of Pain and Symptom Management*.

The qualitative study was carried out by Associate Professor Mervyn Koh (Head of Department, Palliative Medicine, Tan Tock Seng Hospital), together with Dr Allyn Hum (Centre Director, The Palliative Care Centre for Excellence in Research and Education), and Dr Khoo Hwee Sing (Principal Research Analyst, National Healthcare Group HOMER [Health Outcomes, Medical Education Research]), in collaboration with partners from HCA Hospice, Dover Park Hospice, National Cancer Centre (SingHealth), and the National University Cancer Institute (National University Health System).

“Burnout is very real in healthcare. I think if we are honest with ourselves, we must have experienced certain points in our lives that we were either burned out or were very close to it,” said A/Prof Koh, who elaborated that burnout is a prevalent problem for PCCs as their role exposes them to emotional and existential distress from caring for patients who are dying or suffering from life-limiting illnesses.

“When we found that a staggering 33 per cent of the palliative care workforce in Singapore experienced burnout in our 2015 study, it piqued our interest further and spurred us to delve deeper into the issues of burnout and resilience.”

Hoping to identify insights that can help build a resilient and emotionally robust palliative workforce, the researchers designed a multi-institutional qualitative study to study clinicians who have spent more than a decade in the palliative care sector to understand the impact of burnout and resilience on clinician longevity in the palliative care sector.

Through in-depth interviews with 18 PCCs – each with more than 10 years of experience – from different healthcare clusters, the researchers discovered that reducing exposure to external stressors such as stress and pressure is not effective in developing sustained resilience.

They suggested that clinicians undergo a cycle of transformational growth, characterised by the learning phases of Struggling, Changing mindsets, Adapting, followed by Resilience



A/Prof Koh (right) received the Health Professions Education Research Investigator Award (Silver) for his study at the 2019 Singapore Health and Biomedical Congress

(SCAR model), in an iterative process of developing insights and anchoring them in one’s personal growth while striving towards sustained resilience and longevity.

“We feel strongly that the SCAR model conceived in our study is not only for palliative care clinicians, but is also universally applicable to all clinicians in healthcare as well,” said A/Prof Koh. “We also realised that the personal trait of self-awareness was an essential part of any individual’s coping mechanism to manage burnout and to build their own resilience.”

Read the full paper:

Koh, M. Y. H., Hum, A. Y. M., Khoo, H. S., Ho, A. H. Y., Chong, P. H., Ong, W. Y., Ong, J., Neo, P. S. H., & Yong, W. C. (2019). Burnout and Resilience After a Decade in Palliative Care: What Survivors Have to Teach Us. A Qualitative Study of Palliative Care Clinicians with More Than 10 Years of Experience. *Journal of Pain and Symptom Management*.

<https://www.sciencedirect.com/science/article/pii/S0885392419304543>



Struggling, Changing mindsets, Adapting, and Resilience (SCAR) model

# NHG Education Overseas Expert Programme 2020: Quality in Health Professions Education and Competency-Based Education



Prof Jacobs interacting with workshop participants



Prof Jacobs giving his talk on Quality in Health Professions Education at the Yishun Community Hospital

The Education Overseas Expert Programme (EOEP) provides a platform for invited renowned education experts to share expertise and experience on education topics with NHG faculty members and colleagues.

For more details about future EOEPs and other Education & Faculty Development Programmes, please visit: <https://corp.nhg.com.sg/College/Pages/Programmes.aspx>

Professor Joshua Jacobs from Elson S. Floyd College of Medicine at Washington State University was invited by National Healthcare Group (NHG) to speak on the topic of “quality in health professions education and competency-based education”, at the January 2020 instalment of the Education Overseas Expert Programme (EOEP).

Over four days, Prof Jacobs conducted a series of workshops, talks and roundtable discussions for NHG faculty members and colleagues at the Novena and Yishun campuses, where he shared insights on accreditation, quality frameworks and taxonomies, and competency-based health professions education and faculty development.

Consultation sessions were also organised for education leads and educators at the various NHG institutions, which provided them with the opportunity to dive into deeper conversations with Prof Jacobs on quality and accreditation.

Even though participants were not new to 'accreditation' and 'competency-based education', they shared that Prof Jacobs gave them a much better appreciation and understanding of how accreditation can be used to ensure quality education, and also helped them identify clear actionable steps to improve the quality of their programmes beyond accreditation.