

Leadership **In The New Normal**





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About The Healthcare Leadership College

It has now been almost two years since the COVID-19 pandemic swept the world and altered many of our lives. While many of us expected 2021 to be a year where Singapore and the world would emerge into a new normal, it has turned out to be another challenging year where we were tested by the many twists and turns of the virus.

On the path to endemicity, a critical pillar of Singapore's response has been the resilience of our healthcare institutions and colleagues on the frontline, in support and administrative roles, and in policy-making roles. This has been due in no small part to the bedrock of trust, values, and strong leadership built up over many years, which have enabled the strong collective response from the healthcare family during this time of need. Be it in times of crisis or times of peace, leaders play a critical role to influence change and give hope to others. In this year-end special issue, three senior healthcare leaders: Dr Daphne Khoo, Deputy Director of Medical Services; Prof Kenneth Kwek, CEO Singapore General Hospital; and Ms Paulin Koh, Chief Nursing Officer, share their reflections on bringing about change and nurturing future leaders. We hope you will find encouragement and inspiration for yourselves in these words.

We wish all our healthcare colleagues and friends a happy, healthy, and restful end to 2021. Let us look towards 2022 with optimism and confidence!

Dean's Message

Professor Pang Weng Sun

Dean-designate, Healthcare Leadership College

Vice-Dean (Clinical Affairs), Lee Kong Chian School of Medicine

Senior Consultant, Geriatric Medicine, Khoo Teck Puat Hospital



In my medical officer and registrar years, I had the privilege of working under inspirational senior clinicians who led me beyond clinical practice to service development and nurturing the next generation. Their hearts and minds were not merely department nor hospital centric, but always had the perspective of a wider healthcare service. When the Outpatient Dispensaries (OPDs, before Polyclinics were built) were overloaded during flu outbreaks, we were sent out to help. When smaller hospitals were short of staff, we were rotated to provide cover. When MOH saw the need to develop geriatric services, a medical unit in TTSH was converted into a geriatric medicine department and an active plan was conceived to develop services across the clusters.

I have no doubt that many disciplines grew in similar fashion nationwide - committed clinicians paved the way to create departments and expanded their disciplines in various hospitals and specialist centres. Many of these continue to collaborate, whether in service, education or research; and the Covid situation in the past year has shown that our health care services, both public and private, can work together.

Edward Everett Hale (1822-1909), an American historian, minister and writer, wrote the story "Ten Times One is Ten" - about a fictitious character Henry who influenced ten others, each of whom in turn influenced another ten. 27 years later, the figure reached one thousand million... Their philosophy? "Look up and not down, Look forward and not back, Look out and not in, Lend a Hand". The simple approach in this story inspired several charitable groups in real life.

In developing leaders for healthcare, we need to see the impact multiplying across the nation in the long-term. My predecessor Prof Aymeric Lim has done a wonderful job in starting the College from scratch and together with the team established courses targeted at leaders in different stages of their development. The support from both MOH and the Cluster leadership have been strong and we are thankful for their trust and confidence in the College.

The College marks its tenth anniversary next year. It remains for us to live up to the aspiration expressed in the story "Ten Times One is Ten". As one College, our mission is to support and develop good leaders, who in turn, influence and grow other leaders, and collectively have a far larger impact and reach than what the College can do on its own. Together, we can build a strong and large community of healthcare leaders to steer Singapore's healthcare system into the future.



Dr. Daphne Khoo
Deputy Director of Medical Services
Ministry of Health

Letter to our Young Leaders

Dr Daphne Khoo

Dr. Daphne Khoo is the Deputy Director of Medical Services (Healthcare Performance Group) and concurrently, Executive Director of the Agency of Care Effectiveness (ACE), Ministry of Health, Singapore (MOH). The mission of ACE is to drive appropriate care in Singapore through the application of Health Technology Assessment.

Dr. Khoo is an endocrinologist by training and was previously Head of Endocrinology at Singapore General Hospital (SGH). From 2004 to 2011, she was the Director of Clinical Governance and Quality Management of the SingHealth cluster and also served as their Director of Enterprise Risk. She is a past-President of the Association of Women Doctors, Singapore as well as the Association of South East Asian Nations Federation of Endocrine Societies.

From 2011 to 2014, she worked in the private sector as a Chief Medical Officer managing healthcare facilities in 11 countries.

Dear Young Leaders,

Throughout my leadership journey, I have often thought, “I don’t really understand why my boss made this decision.” On a number of occasions, I have disagreed with the decisions made and yet have had to convey these orders to my team and ensure the instructions were carried out. Even though these things may not be within our control, we as leaders still have to find ways to push through unpopular decisions or difficult projects while trying to reduce or prevent conflicts from happening. We also have to recognize that there are times that bosses may not be at full liberty to share with us the all the reasons for a particular decision.

Influencing Change In A Team

All effective leaders need to be good change managers. Change is never easy and I have always found John Kotter’s 8-Step Process for Leading Change to be a very useful framework. Coming from the healthcare sector, everyone generally has good intentions but due to our fast-paced lifestyles, finding the time to communicate adequately with one another is a constant challenge. Hence, it is important to remind ourselves that change management processes need to be well designed and executed.

A critical aspect of implementing change is to gain the cooperation of key stakeholders starting with your own team. People working in the public sector often feel that they are already working at maximum capacity. Therefore to convince staff to willingly take on

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additional work, efforts need to be put in to explain to them why the changes are important and necessary. When staff buy into the change goals, and especially when they switch from reluctance to being passionate about the project, then amazing results can be achieved.

After working for almost 40 years, I also found that one misconception people tend to have is that employees have to do exactly what they are told. I disagree. Most bosses generally get to their positions because they are intelligent people with certain skills and competencies. However, many leaders including myself, often need to make rapid assessments and decisions without the time and resources to do adequate evaluations and may not have full knowledge of the situation. At those times, when staff genuinely believe the decision being taken is not the best one, there is an obligation to point this out in a respectful and polite manner, while providing alternative solutions preferably backed up by facts and reliable data. The worst supervisors are those who simply inform the staff that the organization has made poor decisions and that staff have no choice but to support this. This demoralizes staff and conveys the impression that the supervisor has no influence or courage.

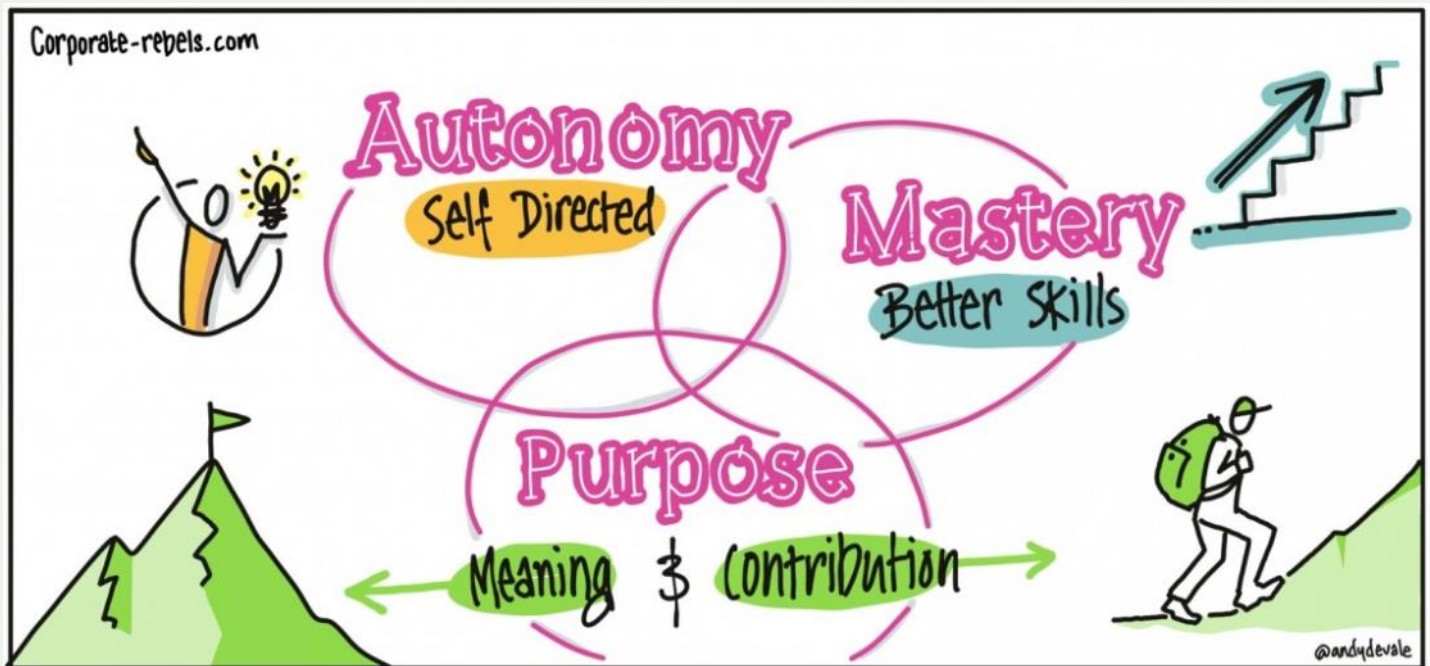
The saying “where there’s a will, there’s a way” generally holds true. On a trip to India, I witnessed how the Aravind Eye Hospitals worked first-hand. The Aravind mission to cure avoidable blindness and each week, hundreds of poor villagers with no access to good eye care facilities are bused in from remote locations to receive free surgeries. To

tackle the issue of shortage of manpower and costs, the organisation trains village girls to perform routine and repetitive tasks, so that the professional ophthalmologists can focus on providing treatment to the patients. Aravind also produced their own cataract lenses as lenses produced overseas were unaffordable. I was surprised that one of the Aravind strategic thrusts was “Strengthening our Competitors” and asked why this was so. They replied that even though they were competitors, they still shared a common mission. This incredible organizational vision, sense of mission and process efficiency has resulted in Aravind becoming the largest Eye care facility in the world, with most of the care going to those who are unable to pay.

In some situations, all the options are seemingly bad. You are caught between a rock and a hard place. Most of these tensions arise from workload where staff are required to take on additional work which they believe to be unnecessary or unreasonable. If you yourself believe that to be the case, then the first step is to discuss this with your own supervisor. It is difficult to motivate staff when neither the boss nor the staff believe that work is important or necessary. Other problems which are seemingly trivial such as moving to a smaller office or a less convenient parking area, can be surprisingly emotive. In these situations, the processes have to be seen to be at least transparent and fair even if all options are unpopular.



The importance of emotional connections cannot be emphasized enough. Good talent has many options, they will be successful wherever they choose to work. Therefore leaders have to consider why people would want to work for you. It is important to demonstrate that you value and appreciate staff. This could be through celebrating successes however small, sharing meals, giving them your time and attention, or even a simple but sincere statement of thanks.



Motivation At Work

The public sector usually cannot reward staff with external motivators such as high salaries, therefore internal motivators are critical. I like the work of Daniel Pink, an American author, who has stated that people are motivated by 3 intrinsic elements: Autonomy, Mastery, and Purpose.

Having spent most of my working life in the public sector as a doctor, I am used to having large amounts of autonomy in decision making. Shifting to the Ministry is a huge culture shock for those used to working in our public healthcare institutions or the private sector. Policy work is multifaceted and by necessity collaborative in nature. The perspectives of healthcare professionals, funding bodies, patients and the public all need to be considered in policy making and there is no such thing as autonomy in policy design as opposed to the treatment you order for a patient. This is not a bad thing but rather a mindset shift is required and leaders need to understand how to motivate staff who are used to high levels of autonomy moving to less autonomous roles. The converse is also true in that people shifting from environments with little autonomy also struggle when moved to those where they are expected to make decisions independently. Regardless, job satisfaction is generally higher when staff feel that they are empowered to make decisions.

Secondly, everyone enjoys the feeling of personal achievement, progress and growth. Staff should be assigned tasks which are not so easy that they're bored and yet so difficult that they feel overwhelmed and eventually burn out. This is the so called stretch or Goldilocks zone. People should also be given the appropriate exposure and training to develop expertise in the areas they and the organization need.

Finally, the last element is the purpose of our work. As healthcare workers, especially in the public space, there is no shortage of work or projects that have purpose and an altruistic element. Even when highly trained specialists such as cardiologists and surgeons were deployed as throat swabbers during COVID, they still found the work to be meaningful and emotionally rewarding.

Team Dynamics

During my stint in the private sector I interacted heavily with HR and OD experts because we had to integrate healthcare teams and leaders from 11 countries each with different country and organizational cultures, performance management metrics and HR practices. As we hired new leaders or transferred leaders from one country to another, HR played a big role in personality assessments and evaluations for job and role fit. I learned that different types of leadership teams were required at various stages of an organization's growth and that just because a leader had a proven track record in one company, this was no guarantee of success in another. In many MNCs today, even junior potential hires undergo 5 rounds of assessments of some form or other, for job fit. Things are very different in public healthcare where we tend to hire people after 1-2 rounds of relatively unstructured interviews.



We talk a lot about leadership but almost never about followership. Leaders are only as effective as their followers. The role of the First Follower is often critical in attracting subsequent followers. Good leaders are usually also effective followers. Almost all leaders are accountable to someone else. I would like to believe I am a good leader but I am sure I am a good follower. If a leader and



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**Leaders are only as effective
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his/her boss are not aligned, the staff will bear the consequences in various ways. A former research mentor of mine used to tell me that his own boss and he had complementary roles and each would not have succeeded without the other. While my mentor led the cutting edge scientific research teams, his boss focused on bringing in the funding and international networks necessary for success.

Different leadership styles work well depending on the nature, size and maturity of the organization as well as the personalities within the team. As a current leader, you might have had to build your team from scratch, been promoted from your department ranks or been parachuted in from a different department or organization. Each situation presents different challenges. It is impossible to be technically strong in all fronts of your department's work but at minimum, staff expect that they should be able to trust and respect their leaders.

No one starts off being excellent, and every experience helps us to grow. All of us will make mistakes and learn from them. I wish you all the best and hope the sharing of my experiences will help you on your journey of becoming a respected and effective leader.



Prof Kenneth Kwek
Chief Executive Officer
Singapore General Hospital

Deputy Group Chief Executive Officer
(Organisational Transformation &
Informatics)
Singapore Health Services

Letter to our Young Leaders

Prof Kenneth Kwek

Professor Kenneth Kwek is the Chief Executive Officer (CEO) of Singapore General Hospital (SGH).

Prof Kwek is passionate about improving the quality of patient care and harnessing process re-engineering, innovation and technology to enhance the safety and reliability of clinical care and patient outcomes. In July 2017, Prof Kwek was concurrently appointed Deputy Group Chief Executive Officer (Organisational Transformation & Informatics), SingHealth.

Leveraging on his experience in hospital management, Prof Kwek attempts to advance value-based care incorporating research and innovation, process redesign and deep collaboration.

Prior to his appointment as CEO, SGH, Prof Kwek was CEO of KK Women's and Children's Hospital. He is an obstetrician specialising in Maternal Fetal Medicine, with a clinical interest centered around care for high risk pregnancies, particularly preterm labour, cervical incompetence, pre-eclampsia as well as post-partum hemorrhage.

Dear Young Leaders,

Leading a team during a pandemic can be overwhelming and may well be the largest test that many leaders face in his or her lifetime. I am heartened to see our colleagues across clusters and institutions step up to support one another without hesitation. You are not alone. I hope you find comfort in this sense of community as we stand with one another through these trying times. In this letter, I would like to share some insights on leadership which I gathered through my career and may these guide you through your journey in healthcare.

Materializing organisational change locally

In large organisations such as our clusters and institutions, one person cannot bring about change single-handedly. We need a group of people to cascade the message downstream for action to take place. Change management forms a huge part of driving transformation and I believe there are two key elements that are fundamental to its success.

As leaders in public healthcare, we should build on that spirit of looking at larger interests in doing what is right.



1. We need to envision an end-state that is captivating. By crystalizing our vision, our peers and colleagues can better understand the rationale of our plans and rally behind them.
2. Time and effort should be invested to reach out to people. By having a keen interest in the needs of our staff and a listening ear, we validate their feedback and foster a greater understanding as to why some of their concerns may not be addressed in the immediate future.

There are times where a cause, however compelling, is met with great resistance. I have learned through negotiations that we need to separate a person's position from their interests. Often, we will realise that their concerns stem from a point of pride or ability. Through dialogue, we try to accommodate and address different interests, and take small steps to facilitate the transition and ease the discomfort of change. Hence, we strive to engage our staff and build their trust so that they know that their feedback is valued and will be taken into account in the process of decision-making.

Cluster-centric mindset, institution-driven goals

When I was appointed CEO of SGH, someone asked me how I would ensure that the culture of the hospital was not displaced by SingHealth's identity. For many of us, our place of work defines our sense of belonging. I feel that it is natural to identify more closely with your primary institution or work units and these sentiments can exist together with a sense of belonging to the larger organization.

When the various healthcare institutions consolidated to three clusters, our leaders had to strike a balance and leverage on the efficiencies of being a cluster while preserving the culture of each institution. The clusters exist to support the institutions, not displace them. It is essential for cluster leaders to recognize the opportunities for collaboration and build on each other's strengths. By fostering a sense of loyalty both at the cluster and institution levels, we inspire synergy in our work and, ultimately, improve the care to our patients which is invariably delivered and experienced at the institution level.

Nurturing leaders and fueling passion for healthcare

Leadership takes on various forms of professional expertise, personality, and style. However, many of us take pride in our deep knowledge of our field. Beyond specialising, we must be able to see the larger picture at the sector and even national level, not just the specific considerations of our specialisations, and understand the difficult trade-offs that have to be made in the interest of the larger whole.

As leaders in public healthcare, we should build on that spirit of looking at larger interests in doing what is right.

We become better leaders by being transparent with our shortcomings and building on the strengths of others through collaboration. Through our work and interactions, every day, we work towards building a culture that upholds duty, a sense of belonging and a shared vision – one that supports our goals for public healthcare.





Ms Paulin Koh
Chief Nursing Officer
Ministry of Health

Letter to our Young Leaders

Ms Paulin Koh

Ms Paulin Koh is the Chief Nursing Officer (CNO) at Ministry of Health (MOH), Singapore.

As CNO, she provides leadership and strategic direction for the development of Nursing and its services at national level and works with various agencies and healthcare clusters on the development of nursing roles and services, policies, workforce development, training, and education matters. Concurrently, she is also the Registrar of the Singapore Nursing Board, which licences and regulates nursing/midwifery practice and education.

Prior to assuming the CNO role in July 2020, Ms Koh was holding concurrent appointments as the Chief Nurse of Changi General Hospital (CGH) and Deputy Group Chief Nurse, SingHealth. She had been instrumental in starting Community Nursing service at CGH, which is supported by the MOH Regional Health System (RHS)-led Community Nursing pilot program. She chaired the MOH National Nursing Taskforce (NNT) Community Nursing Subgroup and Workgroup on Development of Competency Framework where she played a pivotal role in shaping the strategic direction and recommendations on the practice settings, roles and competencies of Community Nurses in Singapore.

Failure is part of the process when we try to make changes in order to progress and grow.

Dear Young Leaders,

As the saying goes, no leader is an island and I am grateful for the many learning opportunities and challenges that have shaped me over the years. As leadership is a collection of practices, behaviours and accumulated experiences, I would like to share with you some of my leadership insights that till today, guide me when I interact with people and make decisions as a leader.

Develop a growth mindset

To grow as a leader, we need to expand our mindsets to embrace new challenges and new perspectives. We have to learn to see things through different lenses.

I remembered when one of my staff approached me with much enthusiasm for a plan to set up a hospital discharge lounge. I did not give her a chance to share more details about her plan, and my immediate response to her was that the plan would not work because of a failed experience I had with a similar plan in the past. After giving my staff such a cursory rejection, I felt bad about it. I went back to my staff and apologised for my reaction, and asked her to develop the plan further. The plan eventually turned out to be a successful and useful one which we implemented.



We can learn to have the *courage* to challenge the status quo to *make things better* even if we have to take some risks .

This experience was a good leadership lesson for me and I was glad to be proven wrong. Failure is part of the process when we try to make changes in order to progress and grow. I realised that there are certain ideas that may not work at certain times or conditions but may work when the situation, environment and people change. Instead of fixing our mindsets based on our limited knowledge and past experiences, we can learn to have the courage to challenge the status quo to make things better even if we have to take some risks. With each challenge, you will gain new knowledge and experience to lead and influence your team.

Treat people in a respectful and professional manner



In today's workplace, it is fairly common for some of our young leaders to be leading staff from different generations, who each have their own expectations and perspectives. Many young leaders often ask me how they can manage staff from different generations, as the differences can cause tensions and conflicts in the workplace.

In the early years of my career as a young leader, there were also times where my senior colleagues became my peers or staff. What worked well for me in managing these relationships, was to not treat them like I am their supervisor and they are my subordinates. Instead, regard them with respect, value their inputs and incorporate their ideas into what you do. As leaders, we can learn to eat humble pie as you will not know everything or be right all the time. Be respectful in the way you interact with them and do it in a professional manner.

How about the younger members of your team? The young generation is a generation that is eager for job opportunities at an early stage of their career. As leaders, we need to realise that expectations of career progression and growth have shifted over the years. Instead of fixating on a set of number of years for one to progress, I would like to think that each generation needs to be better than the generation before them. Borrowing a quote from John Quincy Adams, the challenge for the leader would be to inspire the younger generation to dream more, learn more, do more and become more. Spend the time to understand what motivates and empowers them and leaders can do this through the 3Cs of leadership:

- *Collaborative leadership where leaders cultivate values of open communication, trust and relationship building. As leaders, we model the way in words and actions. Treat your staff with kindness, be open and willing to listen and share your knowledge.*
- *Collective leadership where team members complement each other and different team members can be called upon to lead, depending on the task at hand.*
- *Courageous leadership where younger team members are encouraged to step up to lead when they have the expertise and skills to do so.*

As leaders, we need to coach our young team members to be resilient as career progression does not always equate to job promotion and to look beyond present gains and challenges. Present them with learning opportunities to grow their knowledge and hone their skills. Encourage them to invest in their own learning and the building of value they bring to the job, and support them as they scale greater heights in their career and leadership journey.

Be passionate in what you do



Remember to *care for yourself* too, so that you can continue caring for others.

In the early stages of your career, as you face simultaneous demands from building up your career and balancing other commitments such as starting a family, you may find yourself in a difficult position of either trading off one or the other. This was my dilemma many years ago when I started out as a young nurse. It is indeed a struggle as we learn to balance so many things and sometimes it can be draining, leading to burnout. Even as we look out for our staff as leaders, do also be aware of your limits when you yourself need help or someone to talk to. Remember to care for yourself too, so that you can continue caring for others. I encourage you to foster a positive and optimistic mindset as a strong and effective leader. Do remember as you are working hard, don't lose that passion in what you first set out to do.

As a leader, not only do you need to find your purpose but at the same time you have to encourage and inspire your staff who would have their own aspirations or challenges to deal with. Apart from communicating with them and having a

better understanding of their needs, you can also look out for potential and opportunities for each staff. By empowering them to act on certain parts or roles of the job, you are helping them with the skills to grow and develop. In turn, your staff will see the difference that they make in the workplace and be encouraged by their achievements and become engaged employees. Help the team to stay focus on the goals and uplift and recharge yourselves from time to time. Together as a team, both you and your staff can strive towards achieving excellence in your workplace.

Over these many years, what has kept me going is the meaningful and purposeful work that we do in the healthcare sector. There is much that we can do or contribute to the strengthening of our healthcare system, thereby enabling better health and improving lives. Once you focus on what you set out to do, be strong and press on.

I hope that you will all find the passion, purpose and meaning in the work you do.





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Merry Christmas



WISHING YOU A

& Happy New Year!

About the Healthcare Leadership College

DEVELOPING
LEADERS FOR
SINGAPORE
HEALTHCARE



The Healthcare Leadership College (HLC), a division of MOH Holdings, supports the building of strong leadership capacity and capabilities for our national healthcare system, in line with the Ministry of Health's vision and strategic priorities. We develop and deliver high quality programmes and other learning platforms for public healthcare leaders, covering topics such as leadership and organisational development, public service ethos and values, and key healthcare policies and issues. Find out more here: www.hlc.mohh.com.sg

Leading Healthcare Team

Advisors

Professor Aymeric Lim
Dean, HLC

Ms Lee Shiao Wei
Director, HLC

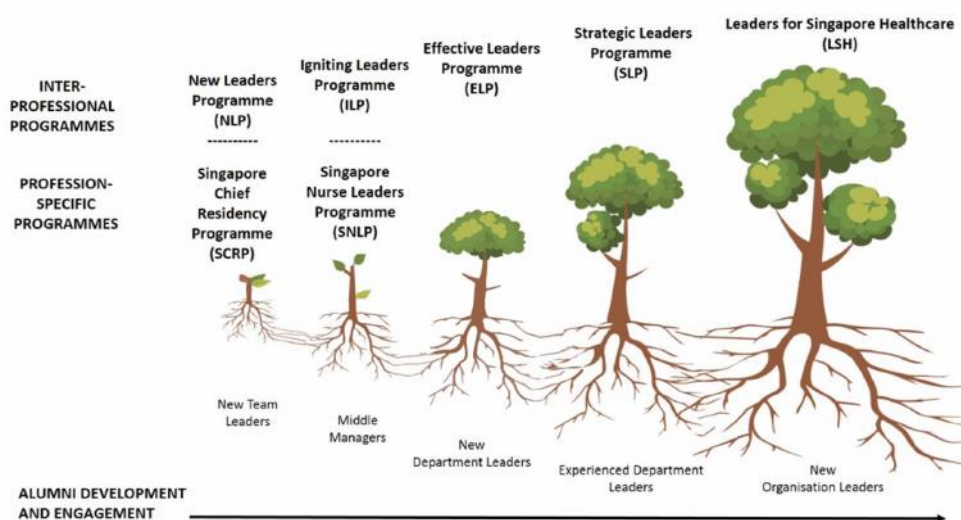
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Leadership Milestone Programmes (Cross-Profession)



- Foster a **one healthcare family** mindset
- Build **shared values and ethos** amongst public healthcare leaders
- Develop understanding of **key healthcare policies**, the rationale and principles behind the policies
- Strengthen **leadership capabilities** of healthcare leaders to enable change and drive strategies to transform healthcare delivery
- Nurture a **community** of healthcare leaders across professions and across the healthcare family and professions

New Leaders Programme (NLP)



The NLP supports the development of high potential first time team leaders in the healthcare family.

The transition from being an individual contributor to leading a team is a significant and challenging milestone. The NLP encourages participants to explore their new role: How does the Singapore healthcare system work? What is my role in the larger healthcare system? What does it mean to lead? What does it mean to lead in the healthcare family?

Programme Manager:
Mr Alfred Cheong

The NLP also provides opportunities for participants to network across healthcare institutions and professions.

Igniting Leaders Programme (ILP)

The Igniting Leaders Programme (ILP) aims to strengthen participants' systems perspectives by providing opportunities for them to examine our healthcare philosophy and policy choices, and understand our larger strategic goals and priorities. This also helps participants understand one another's role in the healthcare system.

The ILP will enable participants to gain insight into their own leadership practice, especially in building their teams, and allows them to re-ignite their sense of purpose in healthcare. The ILP will also be an important platform for participants to foster peer support networks across healthcare institutions and professions.



Programme Manager:
Ms Chia Li Hui

Effective Leaders Programme (ELP)



The ELP is designed to deepen participants' understanding of the healthcare system – its complexity and strategic direction, and widen their perspectives beyond the professional and institutional viewpoints.

The ELP also supports participants in reflecting on their personal leadership practice, and focus on driving change and building teams with a collective mission.

The programme emphasises the building of shared experiences and perspectives among participants, and fosters a trusted peer support community for mutual support and collaboration.

Programme Manager:
Ms Goh You Li

Strategic Leaders Programme (SLP)

The SLP will support our senior leaders to adopt a one healthcare mindset, and appreciate the importance of a whole of system approach that include perspectives beyond healthcare.

Participants will have the opportunity to reflect on their collective leadership and collaborative practice as they lead larger and more diverse teams within and across healthcare institutions.

The SLP is also designed for participants to deepen networks and relationships among their peers to strengthen collaboration in the healthcare family.



Programme Manager:
Mr Jared Koh

Leaders for Singapore Healthcare (LSH)



The Leaders for Singapore Healthcare (LSH) is HLC's new signature programme for senior healthcare leaders with organisational level responsibilities.

As senior healthcare leaders, participants will examine their roles as leaders of and for the Singapore health eco-system, with a larger influence across institutions and clusters, and beyond public healthcare.

Programme Manager:
Ms Chu Min Lian

The programme is conducted over four months, in four segments, and includes a study trip.

Profession-Specific Milestone Programmes

Singapore Chief Residency Programme (SCRCP)



Singapore's healthcare landscape is evolving rapidly with new delivery systems, policies, and educational structures. In this time of transformation, effective physician leadership is essential, and the Singapore Chief Residency Programme (SCRCP) prepares tomorrow's doctors to meet these challenges, promote excellence in the medical education, and advance Singapore's Public Healthcare System.

Programme Manager:
Ms Regine Tan

Singapore Nurse Leaders Programme (SNLP)

The Singapore Nurse Leaders Programme (SNLP) is developed as part of the Future Nursing Career Review Committee's (FNCRC) recommendation to equip future nursing leaders with prior experience in community care before progressing to take on higher leadership positions.

With an increasingly system-level approach towards nursing at the RHS-level, the programme is designed to equip nurses with the necessary knowledge and skills to lead care across multiple facilities- acute and community sectors. The SNLP aims to groom level 2 nurse leaders to be change agents with strong leadership and policy perspectives, and this is achieved via a 2-prong approach, in-person seminars and attachment to the community care sector.



Programme Manager:
Ms Maryse Koh

Alumni Events

The College also hosts events and talks for alumni of its milestone programmes, such as fireside chats with senior healthcare leaders, policy workshops, and learning journeys. Alumni events are open by invitation only, and most fees are fully subsidised by the Healthcare Leadership College.

Programme Manager: Ms Goh You Li
Ms Chu Min Lian
Ms Nicole Lee



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A thin, grey, upward-curving arc is positioned below the text "MOH HOLDINGS".