Voices from the frontline

Contents

Photography production was done before COVID-19 or according to IMDA Media Content Production Resumption FAQ (updated on 25 Oct 2021).

ON THE COVER
Dr Abiramy D/O Anathan  Deputy Head, Choa Chu Kang Polyclinic
Maggie Huang  Nurse Manager, Choa Chu Kang Polyclinic
Joseph Tan  Senior Executive, Choa Chu Kang Polyclinic

Ho Siew Lian, Care Coordinator

SN Thien Kim Yun
We reflect on a year of unprecedented challenges, despite which we learned, persevered and continued to do our best to care for our patients and the community. With a drive for innovation, resilience and focus on patient care, we have grown and emerged stronger than ever.
The ever-changing unknowns brought on by the COVID-19 pandemic have taken a toll on our healthcare system, further exacerbating challenges. I am immensely proud to say that all of NUP faced these adversities with our trademark resilience. Our already laden workload was further complicated by the surge in migrant worker cases when we deployed clinical and operational resources to man COVID-19 care and isolation facilities in the west of Singapore. This asked for many of our team members to sacrifice their personal time, to which they responded willingly, valiantly, and without complaint. Thus the experience has made us stronger, more agile and even more resilient. It has brought to light the distinct NUP Pride culture which we cultivated in a short span of four years, one defined by passion for our work and compassion for the sick and vulnerable.

Transforming Primary Care
Responding to the challenges of 2020 empowered us to further drive innovation for better health outcomes. We are not just a primary care provider, but a force for healthcare improvement through the pursuit of professional development, teaching and research advancement.

As part of NUHS, our purpose at NUP is to deliver Incredible Care and Health. To achieve this goal, we work with our partners who include NUHS entities and community resources such as community care teams, Primary Care Network (PCN), General Practitioners and social agencies. Together, we are on track to deliver holistic assessment and well-coordinated comprehensive care for patients across all ages, in all aspects of health.

Since our inception in March 2017, our focus year-on-year has been to transform care through new care models and programmes. We believe that by focusing on the human connection, we are better able to engage patients in self-management, detect issues and make timely interventions when needed.

In Singapore, where one in four citizens aged 40 and above has at least one cardiovascular-related disease, there is no quick fix. Providing medical care is a long-term endeavour, so on top of offering health screenings for residents and running health posts in the community, we have boosted our team-based model of care for patients with chronic diseases. Today, enrolled patients are followed up by an Identified Family Physician-led teamlet with the aim of providing more comprehensive care through different clinical professionals.

Among these team-based models of care is the Patient Activation through Community Empowerment/Engagement for Diabetes Management (PACE-D), which we launched in 2019 to empower patients to self-manage their diabetes. As at March 2021, 2,036 patients have been enrolled.

Future-ready with IT
We are firm believers in harnessing technology to continually drive improvement and have spared no effort in pursuing productivity enhancement programmes. I would like to extend my heartfelt thanks to the many teams who worked on the mammoth task of rolling out our Next Generation Electronic Medical Record (NGEMR) system, which we successfully installed throughout six polyclinics in FY2020, and in the new Bukit Panjang Polyclinic in October 2021.
Research, the next frontier
Further on the horizon is the development of a pipeline of Clinician Scientists in Primary Care by 2030 as we empower our clinicians to initiate interprofessional collaborative research. As a training centre for family physicians and allied health professionals in the community, NUP is determined to steer primary care research and build a research network to investigate chronic diseases and cancers that are particularly common in Singapore. We are privileged to work closely with NUHS’ Discovery AI (DAI) and Endeavour AI (EAI) Platforms for NUHS Cluster-wide Research to utilise the wealth of integrated data for analysis and future applications in primary care.

Ongoing battle against COVID-19
After almost a year of external operations providing care at dormitories and swab isolation facilities for migrant workers, we transitioned to vaccination operations for patients and staff. With the spread of the more infectious Delta variant, our nurses increased surveillance testing in the form of Antigen Rapid Tests and Polymerase Chain Reaction tests for the public and ourselves within a compressed time frame.

The rapid changes of the past year have meant adjusting to constant shifts in safety management procedures and workflows. We are acutely aware of the impact on our healthcare workers. Our priority, then, was to ensure that our staff are well taken care of as we helped them navigate and adapt to new norms such as hybrid schedules, flexible working hours, working from home, split teams and cross-departmental and institutional work.

True to our NUP Pride culture of looking out for one another, our Psychology team initiated the Virtual Clinic Check-in Programme for NUP staff in June 2020. These virtual sessions offered practical techniques for managing stresses and staying connected in these anxiety-ridden times. We have since inaugurated departmental and polyclinic Wellbeing Champions who are trained to identify colleagues going through difficulties and steer them towards appropriate professional assistance.

Without a doubt, our patients form the heart of what we do and continue to underpin our commitment to patient-centred care. Our staff and team members are the foundation of this mission and we will continue to care for them in the best way we can. Together, we can all achieve our goals and extend our values of providing the best care to the community.

I am deeply grateful for the exemplary resilience of our staff, and for the commitment and sacrifices made in this challenging year. No one could have foreseen the disruption that COVID-19 brought, yet our staff handled it all with grace and a deep commitment to the tasks at hand.

Let us work together to deliver “Incredible Care and Health, Together” for every member of our community.
The desire to help, love and care for each patient gives me strength to do what I do every day. People will forget your words and actions, but not how you’ve touched them.

— Farrah Nathassha Binte Abdul Rahman
Senior Staff Nurse, Jurong Polyclinic
Easing Mental Health Issues at the Health and Mind Clinic

The Health and Mind Services programme is a collaboration between NUP, NUHS Psychiatry and Agency of Integrated Care (AIC). This service is available at Bukit Batok, Jurong, Pioneer and Queenstown (QTP) Polyclinics. QTP is the latest clinic to offer this service, since January 2021.

The programme aims to provide early detection and treatment to patients at risk of developing mental health disorders in a primary care setting. Healthcare professionals involved are polyclinic psychologists and specially trained family physicians. Psychologists can treat mild cases using psychotherapy and refer the more complex cases to doctors at the Health and Mind Clinic (HMC) who may offer pharmacological treatment where necessary.

The service focuses on the common mental disorders such as depression, anxiety and insomnia. It also provides treatment for grief, anger management, stress-related problems and adjustment difficulties.

For many, visiting a polyclinic is far more convenient than visiting a tertiary hospital. Besides the benefits of proximity and shorter waiting times, patient care at polyclinics is more holistic. Their mental needs and acute and chronic problems can be managed in the same setting.

Doctors running the HMC report a greater willingness among patients to start medications such as anti-depressants when they know they will be reviewed early and monitored for clinical improvements and side effects.

Patients seen at HMC report improvements in their symptoms and ability to cope with stressors after seeing the team at HMC.

Better Outcomes Thanks to the Hypertension Value-Driven Outcomes Initiative

Value-Driven Outcomes (VDO) is an NUHS initiative that aims to improve value delivered to patients measured in terms of patient outcomes achieved over expended costs. This empowers clinicians with the tools and information needed to understand the value of care and identify variances and best practices to drive optimisation of cost and health outcomes.

The Hypertension VDO, led by Dr Kwan Yew Seng, Family Physician, Senior Consultant, Pioneer Polyclinic, collects data quarterly which is used to identify opportunities for improvement, possible root causes, and improvement initiatives. It has also enabled the sharing of best practices among clinics.

For example, data from Choa Chu Kang Polyclinic (CCK) showed relatively low percentages of clinical indicators for blood pressure control. Dr Hou Minsheng, Deputy Head, Bukit Panjang Polyclinic, led a team in a quality improvement project in 2019 which resulted in an improvement in the proportion of CCK patients who met their blood pressure (BP) targets, from 70% to 77%.

Besides educating and reminding healthcare providers of the importance of good blood pressure control, the interprofessional team, comprising members from Operations, Nursing, Medical, Pharmacy and the Holistic Approach in Lowering and Tracking Chronic Kidney Disease (HALT-CKD) programme, undertook a number of other interventions. These included revamping the NUP home BP monitoring chart, securing a discount of almost 50% from home BP machine vendors to encourage ownership, tightening the follow-up of sub-optimally controlled cases through the revised Hypertension Care Path, and introducing the BP loan programme which has since been integrated into teleconsultation services for CCK teamlet patients.

These efforts led to improved results in 2020 over 2019. Quality improvement measures are now taking root at Jurong Polyclinic, led by Dr Chin Chi Hui, Family Physician, Associate Consultant.
The Growing Acceptance of Virtual Consults

COVID-19 has pushed many boundaries, especially in the field of medicine. It’s no surprise then that virtual consultations are increasingly popular as they allow patients to consult doctors without leaving home. NUP’s Virtual Consultation Workgroup, co-chaired by Dr Chen Jiawei, Deputy Head, Bukit Batok Polyclinic, and Dr Gwen Lim, Deputy Head, Clementi Polyclinic, have been creating workflows, piloting them in-clinic and refining our teleconsultations while introducing them to various departments such as Nursing and Allied Health.

Teleconsultations have been implemented for patients with simple chronic diseases and include most Chronic Disease Management Programme diagnoses. The initial phases of the teleconsultation programme had its fits and starts, but with committed collaboration from our Care Coordinators, workflow was streamlined, and doctors who tried teleconsultation agree that it is both efficient and beneficial to patients who require medication but are unwilling to visit the clinic because of the pandemic.

The process of teleconsultation has been designed to be seamless and convenient for patients. For example, patients only pay after a successful call and medication is delivered free-of-charge as part of pandemic measures.

For years, our Care Managers (CM) had tried to educate patients on the use and benefits of teleconsultation, but few were willing to give up the perceived value of a face-to-face consult. With COVID-19, however, more patients are willing to opt for teleconsultation, recognising that it reduces their risk of exposure to the virus.

Virtual Consultations for Advanced Care Planning

Advanced Care Planning (ACP) refers to a series of discussions with individuals to plan for their future health and personal care. As of 2020, this service is available at all NUP clinics. NUP patients are introduced to ACP at many touchpoints throughout their care journey and are directed to the dedicated ACP clinic once they are ready to formalise discussions.

To reduce the number of clinic visits during the pandemic, we initiated teleconsultations for first ACP appointments. Patients are briefed by phone on the importance of nominating a healthcare spokesperson before exploring discussions on their beliefs and values about their future healthcare needs.

They are encouraged to discuss their needs with family members and consider nominating a suitable healthcare spokesperson. After the teleconsultation session, patients receive an ACP brochure through the post or by email, allowing NUP the opportunity to press on with ACP initiatives despite the pandemic. Patients only visit the nearest clinic when they are ready to submit and close ACP documentation.

Despite being in its infancy with a relatively small take-up rate, teleconsultation has reduced patient visits to the clinic for ACP purposes. We are better able to provide ACP services remotely and plan for physical appointments in advance, allowing better use of clinic space for other high-volume services.
As part of the Service Transformation (ST) Team, I work closely with various stakeholders to transform the way services such as registration, payment and appointments are delivered to patients. The aim is to empower patients to use self-help services for better convenience and to take charge of their health. Besides the ST workgroup, I also oversee the Referral and Service Culture workgroups. The Referral workgroup implements strategies to improve patients’ access to care at polyclinics and Specialist Outpatient Clinics (SOCs) through continuous improvements in referral workflows and processes at both cluster and polyclinic level. While the Service Culture workgroup aims to promote a culture of competency, care and commitment among our staff to deliver value care for our patients.

I’m proud to say that to date, we have achieved close to 70% of Same Day Appointments booked using the mobile app and close to 50% of TCU Book New made via kiosks.

I’m so grateful for our close-knit team who are committed to and supportive of the work we do. The team is not just dedicated to doing the work well, but we care and encourage each other all the time. Often, we go beyond our scope of work to help one another succeed.

I’m especially grateful to my co-chairs Perry Fong, Jody Teo and Cho Yew Hung (left in photo) as well as team mate Shawn Van (right in photo) for their unwavering support.

Working towards patient empowerment

Adapting to the new normal

COVID-19 has brought great change to the way we work at HQ and clinics. While we used to visit clinics to discuss issues in person, we now do this in a virtual setting, which I find less conducive than face-to-face interactions. It’s also strenuous on the eyes. Still, I check in regularly to ensure that we are all aligned with our work and purpose. I make sure to take short breaks to rest my eyes.

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Teamwork

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Take-up rates, too, are on an upward trend.
We Care: Caring for Our Patients

As one of the nurse leads for the COVID-19 vaccination at Bukit Batok Polyclinic, my role is to plan and manage manpower, consumables and inventory of the vaccination operations.

Our nursing team works closely with the doctors and operations team to ensure that vaccination operations run smoothly and that all vaccinators are equipped with the latest vaccination updates issued by MOH.

The biggest challenges happen when new and stricter vaccination guidelines are issued by MOH. There is a lot of decision-making involved about whether to proceed with vaccinations for affected patients. It is easier now as we know that the vaccination is safe for everyone, except those with allergies to its components.

Another challenge I face is vaccinating patients with a fear of needles. During such situations, I would ask for permission to hold the patient’s hand, speak to and reassure them. Patients are always thankful for this effort.

The last year has taught me to embrace change. Things may not always be great, but I’ve learnt to motivate myself, set personal goals and focus on those end goals. I’ve realised that informing my team about my goals is a recipe for completing a task easily and successfully.

It hasn’t been an easy journey, especially when it comes to working with different departments. There are always differences in opinions and ideas, but most of the time our goals are the same. In situations where there are differences in opinion, I remind myself to take a step back and listen, to better understand the other person’s point of view.

COVID-19 has made working relationships more important than ever. It’s been a hard year, but the upside is that our resilience has made us stronger and closer as a team.

I’ve met patients who are grateful to receive their COVID-19 vaccination. Many of them are regulars at our polyclinic and it’s nice when they acknowledge the work we do.

“I’ve realised that informing my team about my goals is a recipe for completing a task easily and successfully.”

Assistant Nurse Clinician,
Bukit Batok Polyclinic

Bettina Lim
Champion for COVID-19 vaccination
Valuable lessons
Overcoming the challenges
What keeps me going
Vaccinating the Population Against COVID-19

The COVID-19 vaccination service in our NUP polyclinics kicked off on 8 January 2021 with the vaccination of staff. Thereafter, we vaccinated members of the public according to phases set out by the COVID-19 Multi-Ministry Task Force.

Soon after, vaccination centres run by private healthcare providers were opened to increase capacity and expedite vaccination uptake.

The polyclinics remain a popular choice among elderly patients as they allow them to be vaccinated in a familiar healthcare setting.

We are proud that NUP staff have shown incredible support for COVID-19 vaccinations right from the start. Despite the many challenges such as frequent changes in clinical guidelines and criteria for vaccination, our staff showed agility and willingness to adjust their workflow, train temporary staff and give up space in their work areas for vaccination stations.

In the first six months alone, we administered vaccinations for 150,000 members of the public. Today, we have more than 95% vaccination uptake by staff and vendors.

Vaccination is an important means of preventing and minimising the risk of transmission of COVID-19, which in turn prevents overwhelming our healthcare system. With our experience in vaccinating the masses, polyclinics were among the first sites to provide COVID-19 vaccinations in Singapore.

Lightening the Rehab Load with PhysioFirst Clinic

The PhysioFirst Clinic in Choa Chu Kang (CCK) Polyclinic was designed to provide urgent assessments and triaging services for musculoskeletal pain and subsequent referrals for rehabilitation.

Bukit Batok (BBK) and Pioneer (PIO) Polyclinics are primary sites for physiotherapy referrals for all NUP clinics and have waiting times of more than three months for review appointments. To facilitate early intervention, NUP’s Physiotherapy Team piloted the PhysioFirst Clinic in CCK where musculoskeletal (MSK) patients are selected and given a physiotherapy referral within 10 days of the doctor’s referral.

That said, less than 35% of patients at PhysioFirst require additional physiotherapy sessions to improve their condition, so these early assessments help discharge patients from the healthcare system earlier.

The PhysioFirst Clinic is part of NUP’s contributions towards the National One-Rehab Framework, a national push to manage rehabilitation in a more sustainable way through an established framework that facilitates the reintegration of patients into the community.

NUP is reviewing the way MSK conditions are managed at the polyclinics and focusing on pathways in which there is workload-levelling of rehabilitation cases in community sites and the right conditions triaged to appropriate clinical sites in hospitals and community buildings. Together with NTFGH and NUH Physiotherapy and Orthopaedics department, NUP has entered the One-Rehab Musculoskeletal Rehabilitation Plan as part of the NUHS cluster submission to streamline the management of non-surgical MSK conditions. This plan includes the facilitation of referrals to community partner sites such as St Luke’s Hospital (SLH) and St Luke’s Elder Care (SLEC) as they are situated close enough to patients’ living in Choa Chu Kang to make it easy for them to attend their appointments.

Among the positive outcomes of this project is the closer relationship between physiotherapists from NUP, NTFGH, NUH and nearby community partners as they work together toward a patient-centric care plan. Regular meetings between physiotherapists from SLH, SLEC, NTUC and Vanguard to develop and facilitate the One-Rehab project in the west have also increased valuable knowledge-sharing between these practitioners.
2020 was an eventful year for NUP. Between responding to a pandemic on the frontlines and continuing with regular patient care, we also made the leap to a brand new Next Generation Electronic Medical Record (NGEMR) system in all six polyclinics, beginning with Queenstown (QTP) on 28 September 2020.

Before the implementation of NGEMR, public healthcare institutions maintained their own sets of patient records. This meant healthcare providers from different healthcare sectors could only access patient information by making a formal request.

With NGEMR, a patient’s medical history and health status are accessible to doctors and other healthcare providers, enabling them to provide holistic, continuing and timely care. For example, access to information such as drug allergies and current medications helps doctors accurately prescribe medication and prevent unnecessary side effects. Having a secure central system, where doctors can access the results of blood tests, x-rays and other scans, also reduces the need, time and cost of repeated tests.

"NGEMR has given us greater assurance in managing our patients now that we share a common patient record with our medical colleagues!"

- Dr Neo Tian Cheng
Head, Bukit Panjang Dental

Next Generation Electronic Medical Record (NGEMR) System Goes Live

We Care : Caring for Our Patients

NGEMR Cutover Journey

Testing complete Training for trainers ends

Staff (end-users) training starts

Full Dress Rehearsal

QTP Go-Live

Other Clinics Go-Live (BKK, CCK, CLM, JUR, PIO)
NUP is the first polyclinic group in Singapore to operate fully on NGEMR. Being a trailblazer meant braving novel and unfamiliar challenges that our team overcame with inspiring camaraderie. The implementation of NGEMR followed almost three years of intense preparation and months of training that culminated in a 24-hour cutover period that started at 7pm on 24 September at QTP. It called on every NUP team member to work with internal and external partners so that the delivered solutions were able to meet our clinical and operational needs.

Various technical stop-start sequences were co-ordinated, executed and completed with almost clockwork precision, yielding a successful cutover to the new electronic medical records system, Epic. The remaining five NUP polyclinics’ cutover to Epic took place on 13 November. The implementation of NGEMR is not just a significant milestone for NUHS, but for Singapore. When the project is completed across all 40 participating institutions in 2022, two out of our three healthcare clusters — the National University Health System and the National Healthcare Group — will be on board, bringing us closer to our goal of ‘One Patient, One Record’, that would pave the way for truly seamless care for patients to be delivered across settings and throughout their health journeys in Singapore.

NUP Dental Service was the first institution to implement Wisdom to replace the siloed dental record system and integrate with medical records in NUHS cluster. With this in place, dentists have access to real-time health information and better communication tools between care providers of patients with complex medical conditions.

There has long been an established link between oral and overall health. Oral issues can increase the risks of chronic conditions such as cardiovascular diseases, while systemic diseases such as diabetes can compromise oral health. Among the key impacts of fully integrated medical and dental records is improved patient outcomes through prevention, early detection and proper intervention. For instance, Wisdom makes it easy for dentists to identify diabetic and prediabetic patients with access to their HbA1c results.

There was some initial hesitancy among dentists who were used to bespoke dental electronic medical record systems. Once Wisdom was implemented, however, many appreciated the advantages of an integrated record. Among these advantages are the transparency of real-time health information and enhanced patient safety, thanks to prompted alerts of medication histories with dental implications.
My role was to ensure that changes to existing workflows resulting from NGEMR did not impact the accuracy, timeliness and completeness of billings and claims. To share critical changes and key risks arising from NGEMR to NUP stakeholders, my team conducted a Financial Readiness Day.

As expected, during the cutover, issues relating to charging emerged. We worked with various clinical groups to reiterate the prescribed charging workflows to ensure charges are filed on a timely basis. We also held sessions with IHIS and Epic charging teams to implement urgent fixes within two days of going live.

I was impressed by the commitment of internal NUP teams and external support teams throughout our NGEMR journey. Everyone really came together to ensure that the concerns of every stakeholder were addressed weekly.

The COVID-19 pandemic has been hard on us all, and it has reminded me that primary care has a direct impact on patient welfare. So we should always be vigilant and conscientious about patient welfare.

Working from home for such a long period was tough, but the Mental Health Support series of Zoom webinars helped me cope. The relaxation techniques I learnt prevented me from being too stressed out.

In times like these, teamwork resonates deeply with me. We need mutual support to implement policy changes and address issues together. None of us can do any of it alone.
Funded by the Tote Board Community Healthcare Fund from 2 May 2018 to 1 May 2021, the Great Simple Tasty (GST) Corner at Bukit Batok Polyclinic provided education on nutrition through cooking demonstrations and food tasting sessions. These guided people on the basics of cooking at home and adopting healthier food choices which goes towards better managing chronic diseases. In the first seven months of the pandemic, the GST Corner was closed to comply with the Ministry of Health’s (MOH) guidelines, preventing the team from reaching their intended 8,000 participants over the three-year funding period.

During this time, the dietetics team worked closely with our health promoter who was tasked with developing cooking videos in the safety of her home. The 58 videos she created, a true labour of love, were used in place of cooking demonstrations when restrictions eased to allow groups of two and, later on, five for group activities. These adapted activities took place at the GST Corner while patients waited for their consults, making their waiting time feel shorter while learning how to cook healthy meals at home.

All patients surveyed said they found the GST Corner useful. 99% reported that these sessions taught them new ways of healthier eating and that they were likely to make changes to their eating and cooking habits.

On 21 and 27 January 2021, staff enjoyed a catered lunch while participating in the Falls Prevention Zoom Event jointly organised by the NUP Falls Prevention Committee (FPC) and Quality Department. Themed ‘Avoid a Fall, Safety for All’, the event sought to raise awareness on the causes of falls that occurred in 2020 and how to prevent similar incidents.

The virtual sessions were led by Dr Chen Shing Huei, former Family Physician, Associate Consultant at Bukit Batok Polyclinic and FPC Chairperson, who shared ways to prevent falls, safe wheelchair use and medication-related falls. She also provided an overview of the falls prevention initiatives in 2020.

To publicise the event, the team launched two pre-event quizzes while a series of other quizzes kept staff engaged throughout the event. Response to the event and quizzes was overwhelmingly positive. The delivered content was targeted at enhancing staff’s understanding of falls prevention, and how they can apply practical and effective steps to improve safety for patients and staff.

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“Research is a process of acknowledging the limitations of what we seek and being able to trudge the unknown paths. We may not gain the complete answers, but we can ask new questions.”

- Dr Tan Wei Beng
Family Physician, Associate Consultant, Jurong Polyclinic

Advancing Health Through Research
Autism Spectrum Disorder (ASD) is a prevalent childhood development disorder with rising global incidence. The majority of individuals with ASD experience poor outcomes as adults, leading to significant cost and disease burden. To study the effectiveness of systematic screening of well children for ASD, we have implemented screenings for young children at primary care clinics in Singapore using the Modified Checklist for Autism-Revised with Follow-up (MCHAT-R/F) questionnaire. Created in close collaboration with NUH Child Development Unit (CDU), the study involves NUP nurses, research assistants and physicians.

Recruitment for the study began in October 2020 though the COVID-19 pandemic brought with it challenges to the team. Nurses were laden with COVID-19-related services, which made recruitment difficult and delayed its start. Children attending their 18-month-old well-child development visit at NUP are offered an opportunity to participate. As at May 2021, 1,370 children have been recruited and 29 referred to CDU. A significant proportion of referred children were found to have developmental issues and are undergoing assessment and early intervention.

Outcomes for children with ASD in Singapore remain sub-optimal because they are not diagnosed at an early age and often miss the known “golden period” for early intervention. Earlier diagnosis allows earlier access to appropriate interventions, which in turn leads to better outcomes for the child and family.

Hence, there is potential for implementing early screening for young children as a routine standard of care in all NUP clinics and influencing other primary care centres across the country to adopt it.
Journey in research

When I was more involved as a nurse, I was active in the areas of training, education, and infection control. This served as an impetus for me to engage in research in these areas. Over the years, I have been engaged in research related to the knowledge, attitude and perception of healthcare workers on multi-drug resistant microorganisms, the rate of contamination and microbial load on the hands of healthcare workers in primary care settings, use of self-determination theory to improve hand hygiene compliance in primary care (just to name a few).

I am currently leading a small group of four nurses in their study project.

Resilient in the face of challenges

Nurses are generally resilient in the face of challenges. The education and infection control team was quick to contextualise, accommodate and acclimatise to the situation as it evolved.

In education, we instituted relevant safety measures during the conduct of essential training for new nurses and implemented online learning. As for infection control, we put in place surveillance and measures to ensure the safety of both patients and healthcare workers in the clinics during the pandemic.

Providing good support and being available via chat group has enabled our infection control link nurses to receive real-time advice on pertinent issues and guidance to navigate COVID-19.

Pillars of support

I’m grateful to the good team of infection control link nurses we have in the clinics who are doing excellent work at keeping a watchful eye on compliance to infection control practices.

I am equally grateful to our dedicated nurse educators and trainers who have worked tirelessly to ensure learning continues amongst our new and junior nurses via various online modes of delivery amidst the pandemic.

Importance of our Core Values

Our core values - TRICEPs* helped us reach greater heights despite the challenges of a pandemic that has overrun its course. I would like to think that teamwork and excellence can only be realised if we practise respect and compassion for each individual in the team to promote self-esteem and motivation to do better.

It is absolutely essential to have self-awareness and to continue to live out our core values in order to move forward and achieve the best for our patients.

*Teamwork, Respect, Integrity, Compassion, Excellence and Patient-centredness.
Chronic kidney disease (CKD) is common among the elderly, yet many of these patients are not referred to nephrologists. By 2035, about a quarter of Singapore residents are expected to suffer from CKD.

NUP conducted a study to compare the care plan between two groups of patients (referred and non-referred) who are >=65 years old and had been diagnosed with CKD stage 3B and above.

The study used retrospective data of 1,536 patients seen at NUP clinics from 1 January to 31 December 2018. The mean age of the non-referred patient group (n=1,179) was 78.3 years old and that of the referred patient group (n=357) was 75.9 years old.¹

Analysis showed that the group of older patients who received care in the primary setting (i.e. not referred to specialist outpatient care) was prescribed less fibrate, statins, insulin, sulphonylureas, Dipeptidyl peptodase-4 inhibitors and aspirin, when compared to the referred group of younger patients.²

This has led NUP to review the referral criteria to detect patients in real need of early referral to a nephrologist. It also highlighted the need for further qualitative studies in primary care to account for the differences in care delivery. These studies will provide insights into the underlying reasons for non-referrals such as a patient’s reluctance to be referred and/or the influence of a patient’s family in that decision.

Led by Dr Tan Wei Beng, Family Physician, Associate Consultant, Jurong Polyclinic, this project has been accepted for poster presentation at the upcoming Royal College of General Practitioners Conference in 2021 in Liverpool, UK. Its manuscript is being prepared for peer review for publication in the British Journal of General Practice.

¹ The differences in age between the referral group and those non-referral group were shown to be statistically significant (p< 0.001).
² This constituted a statistical significance of p< 0.05
Self-management of Blood Glucose Levels Through GLiMPSE

The Glucose Monitoring Programme Singapore (GLiMPSE) is part of a nationwide trial in which Jurong Polyclinic is a participant. Recruited patients comprise two groups. The first are randomly selected to receive their usual care, sponsored with a blood glucose monitor and strips, and regular dietitian, care manager and doctor visits. The second group receives Freestyle Libre glucose monitors to take their own blood glucose readings.

Numerous patients with diabetes have poor control over the disease due to a lack of education, which affects their motivation to adhere to lifestyle measures and compliance to medication. GLiMPSE hopes to effect change in self-management behaviours among these patients to improve their Type 2 Diabetes (T2D) outcomes.

The patients in this trial aged above 21 years old with T2D and HbA1c readings between 7.5% and 10%. They are either on diet-controlled oral glucose-lowering drugs or background insulin. These patients have sub-optimally controlled T2D despite being on medication. The study team is looking to find if the Flash Glucose Monitoring programme will result in greater improvement in HbA1c readings compared to the standard care group using capillary blood glucose.

The programme was rolled out in March 2021 with the target of recruiting 30 patients for study. It has so far recruited 12 patients and the results have been encouraging.

“*It was great to witness patients coming back after each session making better diet and lifestyle choices. In addition to traditional patient education, the use of technology has helped patients take better control.*”

- Bernice Tan
  Dietitian

Inaugural Forums on Primary Care Research

Despite the pandemic, NUP’s Department of Family Medicine Development (FMD) facilitated its first joint research forum with the NUHS Department of Family Medicine (DFM).

During the NUP-DFM Joint Research Forum held on 28 January 2021, a multi-disciplinary team from NUP comprising Medical, Nursing and Allied Health staff, gave presentations on research studies with a focus on primary care. Veteran family physicians from NUHS DFM also shared their research findings.

The forum was a good platform for researchers to share multi-disciplinary studies in primary care and is an encouraging start for more cross-learning opportunities in the future. One participant was particularly impressed by the presentation by Prof Doris Young, Head, NUHS DFM. The participant found it to be very encouraging and motivating when Prof Young presented her views of how future research should be, especially on the collection of clinical data beneficial for a good outcome. Attended by more than 100 participants, the research forum was a success.
Research for advancement

Research is the basis on which new knowledge is discovered, and in order to advance and improve on our clinical work in NUP, it is crucial that the practice of Family Medicine is evidence-based and research-driven. Being part of this important endeavour is what motivates me to keep doing research.

My areas of interest in research are chronic disease management and women’s health issues. I am currently conducting a research study on using quality care indicators to assess the state of detection and management of chronic kidney disease (CKD) in NUP, for which I have been awarded a NUHS Primary Care Physician Research Development (PCPRD) seed grant. I am also involved in a study on managing women with a history of gestational diabetes mellitus (GDM).

My study on CKD involves the extraction of data from the electronic medical records for analysis, and does not include interaction with patients. In this aspect, we have been minimally affected by the safe-distancing and crowd limitation rules enforced because of the COVID-19 pandemic. However, the opportunities to meet physically as a study team have been limited, and we mostly communicate through emails and Zoom meetings, which can be good substitutes, but may not be as effective as a physical meeting.

Lessons must go on

During this current pandemic, teaching activities such as workshops, group tutorials, and cross-cluster clinic sessions could sometimes be cancelled because of the pandemic and the prevailing crowd limitation and safe-distancing rules. Working around this, these activities are replaced with online Zoom sessions, and even face-to-face tutorials in smaller groups. As far as possible, the aim is to not compromise clinical teaching, but to adapt methods to ensure adequate clinical exposure and learning.

Some students, especially at the start of the pandemic, had queries about how our healthcare system was coping, and what strategies and measures were being employed. I would try and address their questions and concerns as best I can, to the best of my knowledge at the time. I would certainly not ignore them as they are very real issues that affect us all in this profession.

Pillars of support

At work, I am thankful for the strength and resilience shown by my colleagues in the clinic, in the face of the ever-changing and evolving COVID-19 pandemic. On top of having to cope with and adjust to the many necessary changes to our clinical practice and guidelines, often at a moment’s notice, we have had to deal with the very real concern, from patients as well as among ourselves, of contracting the COVID-19 infection. Despite this, we have stood by each other closer than ever, and banded together to fight the pandemic. I am grateful for this fighting spirit in the midst of adversity.

At home, I thank my family for their understanding towards my work and the risks I face in the clinic. They have been a tremendous pillar of support in this time of uncertainty, and I have been greatly comforted by the love they have shown me.

Compassion

In a time when everyone is going through an unprecedented period of uncertainty, fear, doubt, and for many, financial difficulty, it feels like we must all the more show compassion, to our patients, but also to our colleagues and friends. Place ourselves in the shoes of others and offer a helping hand or a listening ear, whenever we can.
“The work of an educator is very meaningful as the knowledge passed on will eventually benefit our patients.”

- Lynette Goh
Principal Dietitian
NUHS Family Medicine Residency Programme

The NUHS Family Medicine (FM) Residency Programme provides training across multiple specialties, patient groups and practice settings to develop thinking, competent and compassionate family physicians, able to meet the nation’s changing healthcare needs.

NUP plays an important role in supporting this programme by offering its clinics as additional training venues. With enrolment increasing from 6 to its current 30 residents, Bukit Batok Polyclinic was added as a site in 2020, on top of weekly continuity clinics at Pioneer and Choa Chu Kang polyclinics.

NUP’s MMed (Master of Medicine in Family Medicine) Bridging Programme provided preparation support for NUP doctors taking their clinical exams for the MMed in November 2020. All participating residents passed their exams.

The support and resources provided as part of the NUHS FM Residency Programme expose residents to the many aspects of practising family medicine in the community.

They equip doctors with a better understanding and more well-rounded experiences of family medicine on the frontlines, especially in trying times like these.

NUP-DFM Faculty Development Workshop 2021

On 20 March 2021, about 50 family physician educators gathered at National University of Singapore MD1 Tahir Foundation Building to participate in a one-day Faculty Development Workshop. In a first collaboration of its kind, the event was jointly organised by NUP and NUHS Department of Family Medicine (DFM) to share the principles and practice of clinical teaching and learning. The participants comprised NUP practitioners and general practitioners from NUHS’ Residency Programme with various levels of experience in medical education. This made for meaningful exchanges and pollination of teaching ideas.

The morning began with important foundational concepts in medical education, including the teaching, learning, and assessment cycle. In the afternoon, participants tried their hands at facilitating small group teaching and overcoming preceptorship challenges. The day culminated in an inspiring sharing by faculty members on the spirit of mentorship. Everyone emerged better equipped and energised to become effective teachers for their students.

...an inspiring sharing session!
Passion for education
I have the privilege of teaching medical students and family medicine residents when they come for their postings. I am also involved with the MMED bridging programme and GDFM/MMED mock exams to help prepare our candidates for the exams.

I feel honoured to be selected for the NUHS Young Clinician Mentor Award.

Coping with the pandemic
As the pandemic evolves rapidly, it is important to be agile and resilient. I had to keep myself constantly updated with the latest COVID-19 related developments such as the vaccination rollout and the home recovery programme.

PPEs and social distancing also became regular features at work. I miss the times when we could have lunch together as a team and catch up with one another.

Significant moments in a trying year
My little bundle of joy arrived in May this year. Throughout my wife’s pregnancy, I was constantly worried for her well-being as she was cooped up at home most of the time and as pregnant ladies were not eligible for vaccination then. Thankfully, she had an uneventful pregnancy and we are now a happy family of three.

I was also heavily involved in the transition from CPSS2 to Epic. I had to attend change management sessions, conduct teaching sessions for our doctors and provide floor support post go-live. Thankfully, we had a relatively smooth transition despite the ongoing pandemic.

Care from NUP
I am thankful for the quick roll-out of the COVID-19 vaccination and the adequate supply of PPE at work. These are important defences against the COVID-19 virus. NUP also provided regular care packs to encourage us and I even got a staycation earlier this year to spend with family. My bosses are also constantly on the ground looking out for us and ensuring our wellbeing during this pandemic.

Teamwork
Throughout my seven years working here, I have experienced first-hand the differences between good and bad teamwork. All of us play an important role in delivering quality care to our patients and our combined efforts bring about synergistic effects because Together Everyone Achieves More!
Nurse-led Rescue Therapy Programme For Patients with Asthma

As the first points of contact for acute patients, polyclinic nurses play a pivotal role in early assessment, identification and treatment of patients presenting with asthma. A nurse-led rescue therapy programme was thus initiated to equip nurses with lung auscultation skills. In September 2019, an inter-professional team comprising a doctor, nurse educator and advance practice nurse conducted the first in-house training programme for 11 nurses who were subsequently assessed and certified competent to perform lung auscultation and administer rescue therapy according to protocols. A second batch of nine nurses completed their training in January 2021.

In the past, it would take about 20 minutes for a patient to be seen and assessed by a doctor before receiving treatment. **With this nurse-led rescue therapy programme, nurses assess patients immediately and provide rescue therapy within minutes of the patient presenting at the polyclinic.**

Despite COVID-19 increasing the workload for nurses in 2020 and 2021, it was heartening that our nurses wanted to learn and upskill themselves as part of this programme. The initiative, which has since become standard care for asthma exacerbations in all polyclinics, also fostered a collaborative spirit between doctors and nurses as they worked towards the common goal of improving care for patients with asthma exacerbations.

Inaugural Women’s Health Symposium

NUP’s Department of Family Medicine Development (FMD) held the inaugural Women’s Health Symposium on 30 January 2021, with the aim of providing a practical course on the management of women’s health with a primary care focus. Women encounter various health issues and concerns at different stages of their lives, which makes women’s health a diverse and wide-ranging topic relevant to the practice of primary care physicians. More than 100 participants attended the symposium.

Guest speakers from NUH Department of Obstetrics & Gynaecology covered a range of topics such as common uro-genital conditions, contraception, first trimester tests, ultrasound pelvis findings and subfertility management.

Participants found this symposium especially helpful as a wide variety of women’s health issues relevant to primary care doctors were touched on, coupled with clear and useful information applicable to daily practice.

All were enthusiastic, spawning lively discussions. Besides slides and photos of the talks which added to the engagement of the session, the speakers were informative, making it an enriching session for all involved.
Wearing many hats

1. Clinically, I run a clinic looking after patients with musculoskeletal (MSK) conditions who are often in pain.
2. I am also an Educator, coordinating Singapore Institute of Technology (SIT) placements and supervising students who are attached to our clinics.
3. Operationally, I assist with managing a team of Physiotherapists and Therapy Assistants to ensure that the daily operations are smooth.

Different challenges

On a personal level
It is kind of blurred now if you asked me, as I feel that I have already gotten used to the situation. I can vaguely remember how tough it was at the beginning. I had a new portfolio just before the announcement of the circuit breaker and we had the cutover to the new medical record system just a few months later. I had to accept that it was frighteningly REAL. I was new to the job and had to learn operations from scratch. Thankfully, I received a lot of support from my team mates and guidance from my supervisor. In addition, I was also managing a change of routine at home.

At work
We are a very lean team. The cross-institution movement restrictions (during COVID-19) made it challenging to deploy staff to various clinics. We did not want to close clinic as much as possible as it would affect the patients who had been waiting for their appointment. At the same time, it was important for our staff to feel safe and supported.

On anxious patients
“Is it SAFE to come to the polyclinic?” is a common question I receive from patients. I would always say YES! and explain how our segregation protocols work to keep everyone safe.

Emerging stronger
Personally, surviving this pandemic and staying in the job is an achievement! I guess I have emerged stronger. There were times when I felt really down and was ready to call it quits. But I am glad that I could overcome those difficult times, that I have a meaningful job and I can still go on with my life.

At work, it would be the consecutive NUHS teaching excellence awards and service quality award that I have received in the last two years since I joined NUP. It is great to be recognised for my contribution.

Teamwork and Patient-centredness
Teamwork and Patient-centredness are very important core values. The pandemic has taken a toll on many people. We hope to reach out to as many people who need our help and that every patient who walks out of our clinic is one patient happier. We will need our team to come together to achieve this.

We had SIT students coming in as well. We are very supportive in training our future physiotherapists, as we want them to graduate on time to join the workforce and we had to react to the changing protocols from because of the pandemic.

Words of encouragement I would give to my juniors:
1. Hang on, it will not rain forever.
2. Let me know how I can help.
At NUP, we deeply value our staff. With work from home becoming the norm and the uncertainties brought about by COVID-19, we have adapted some of our HR programmes and launched new initiatives to better meet staff needs.

**A platform to promote healthy living practices among NUP colleagues**

The Workplace Health Promotion (WHP) committee was established to promote healthy living practices among NUP colleagues and their family members. The Committee worked with the Allied Health Services Team on a series of talks to help staff better manage the challenges brought about by the work-from-home arrangement.

Sponsored by NUHS, the committee rallied NUP colleagues to participate in Singapore Cancer Society’s Relay For Life Marathon 2021. Held virtually from 20 to 28 March 2021, the event raised a total of $1.5 million, surpassing Singapore Cancer Society’s goal of $900,000.

**A safe space for Human Resource-related discussions**

Human Resources (HR) launched the HR Clinic in 2018 to engage staff and address their queries. Because of the pandemic, the bi-annual HR Clinic was migrated online and opened between 2 and 8 November 2020. Two HR Clinics have been conducted since November 2020.

**A walk in the park with loved ones**

Relaunched under OneNUHS in September 2020, the OneNUHS Corporate Pass to Wildlife Reserves Singapore (WRS) gives NUP staff a chance to ballot for a free visit to Jurong Bird Park, Night Safari, River Wonders and Singapore Zoo. Staff may bring three other people along on their visits.

**Showing we care with NUHS Cares Day**

A quarterly initiative started in November 2020, NUHS Cares Day aims to improve staff wellness under the Care For Our People work plan. In 2020, NUHS Cares Day kicked off with the distribution of 834 care hampers to COVID-19 frontline staff and selected HQ staff who were involved in SIF/dormitory operations.

In March 2021, with the theme of Eat Healthy To Stay Healthy, we distributed fruits were distributed to staff across NUHS institutions to show our appreciation for their hard work and dedication.

**Physical and mental health initiatives for staff**

The OneNUHS Virtual Fitness Programme was conducted bi-weekly on Zoom.

Throughout February and March 2021, NUHS held Virtual Mind Gym Lunchtime Mindfulness Classes with Mind Science Centre under the theme Staying Strong, Staying Well.

Silent Retreat was another initiative launched by NUHS and Mind Science Centre. Held on Zoom, the Half-Day Online Silent Retreat aimed to help staff find peace amid the pandemic.

The anonymous and free Staff Counselling Services initiative was adapted in light of the pandemic, with all appointments converted to phone counselling from 24 May 2021.

NUHS gave all staff complimentary access to digital tools on Wysa, the number one rated app by NHS (UK) Health App Monitoring Services.

Generously sponsored by the Pan Pacific Hotel Group, the 11:11 Livestream for Complimentary Pan Pacific Hotel Stay gave 936 eligible staff the chance to win 436 vouchers from five participating hotels.

**The gift of gratitude**

The inaugural Expressing Gratitude 2020 was held to encourage NUP staff to extend their gratitude towards their peers.

Many messages of appreciation were received, including one from our CEO!

A Thank You Note from Dr Lew Yee Jen, CEO:

“I want to give a shout-out to our frontline workers serving at the polyclinic entrances and the Red Zones. Your dedication at work is amazing! Despite the inconvenience of wearing PPE in the hot weather, you continue to do a good job. You also attend to our patients with great care and respect. A blessed new year to all of you!”
Senior Management Team

Dr Lew Yi Jen
Chief Executive Officer

Mr Samuel Ng
Chief Operating Officer

Dr Keith Tsou
Director, Clinical Services

Ms Dawn Sim
Head, Communications and Service Quality

Dr Wendy Wang
Director, Dental Services

Mr Matthew Ng
Chief Financial Officer

Dr Zhang Zhi Peng
Head, Choa Chu Kang Polyclinic

Dr Anandan Gerard Thiagarajah
Head, Clementi Polyclinic

Dr Franco Wong
Head, Jurong Polyclinic
Ms Jancy Mathews
Chief Nurse

Dr Meena Sundram
Director, Family Medicine Development

Dr Voo Yau Onn
Chief Medical Informatics Officer and Director, Quality

Mr Simon Tan
Chief Human Resource Officer

Dr Kwek Sing Cheer
Head, Bukit Batok Polyclinic

Dr Tan Kim Kiat
Head, Bukit Panjang Polyclinic

Dr Tan Wee Hian
Head, Pioneer Polyclinic

Dr Alicia Boo
Head, Queenstown Polyclinic

Dr David Tan
Programme Director, NUHS Family Medicine Residency
### Milestones

#### 2020

<table>
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<tr>
<th>Date</th>
<th>Event Description</th>
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<tbody>
<tr>
<td>20 Mar</td>
<td>NUP-DFM Faculty Development Workshop held to share the principles and practice of clinical teaching and learning with participants.</td>
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<tr>
<td>16 Mar</td>
<td>4 NUP nurses stepped up when Ng Teng Fong General Hospital's Emergency Department reached out for manpower support.</td>
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<tr>
<td>11 Apr</td>
<td>5 staff members from NUP’s Allied Health team volunteered to man the National Care Hotline, rolled out by the Ministry of Social and Family Development. The hotline was set up to provide support for those emotionally and mentally weighed down by the effects of the pandemic.</td>
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<tr>
<td>Apr</td>
<td>More than 80 NUP staff – doctors, nurses, allied health and administrative professional staff – were mobilised to provide outfield medical support in mobile medical posts in dormitories and setting up and managing Swab Isolation Facilities (SIFs).</td>
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<td>1 Jun</td>
<td>Virtual Consultations for Advanced Care Planning Service available at all NUP clinics.</td>
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<td>1 Jul</td>
<td>Launch of cross-sectional study of nephrologist referrals of patients with chronic kidney disease.</td>
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<td>1 Jul</td>
<td>Launch of Paperless Total Performance Management (TPM) Moderation.</td>
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<td>28 Sep</td>
<td>Queenstown Polyclinic successfully cutover to Next Generation Electronic Medical Record (NGEMR). Wisdom, a dedicated dental module on NGEMR, was launched.</td>
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<tr>
<td>Nov</td>
<td>All NUHS FM residents enrolled in the NUP MMed FM Bridging Program passed their MMed examinations in 2020.</td>
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<td>5 Nov</td>
<td>Nurse-led Rescue Therapy Programme for patients with asthma launched.</td>
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<tr>
<td>16 Nov</td>
<td>NUP became the first polyclinic group in Singapore to fully operate on NGEMR. Successful cutover for Bukit Batok, Choa Chu Kang, Clementi, Pioneer and Jurong Polyclinics.</td>
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<tr>
<td>21 Dec</td>
<td>Bukit Batok Polyclinic was added as a training site for NUHS Family Medicine (FM) Residency Programme, allowing for an increase in enrollment for FM residents.</td>
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<tr>
<td>21 Dec</td>
<td>Launch of ‘PhysioFirst’ Clinic in Choa Chu Kang Polyclinic.</td>
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#### 2021

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<tr>
<th>Date</th>
<th>Event Description</th>
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<tr>
<td>1 Jan</td>
<td>Launch of new NUHS cluster-wide HR system - myHR.</td>
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<tr>
<td>5 Jan</td>
<td>Launch of Health and Mind Clinic at Queenstown Polyclinic.</td>
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<tr>
<td>8 Jan</td>
<td>Launch of NUP COVID-19 vaccination service.</td>
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<tr>
<td>10 Feb</td>
<td>58 cooking videos featuring healthier recipes were launched by Great Simple Tasty Corner.</td>
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<tr>
<td>Mar</td>
<td>Glucose Monitoring Programme Singapore (GLiMPSE) roll out at Jurong Polyclinic, as part of a nationwide randomised trial.</td>
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Awards

National Day Awards 2021

Public Administration Medal (Bronze)
DR KEITH TSOU YU KEI
Director, Clinical Services
Family Physician, Senior Consultant

MS JANCY MATHEWS
Chief Nurse

Commendation Medal

MS TAN KAR LENG
Assistant Director, HQ Clinic Operations

MS TEO LAY SZE
Senior Nurse Manager, Nursing Administration

Long Service Medal

MS CHUA CHOR LENG
Digital Archival Assistant, Clementi Polyclinic

MS GURMIT KAUR
Patient Care Assistant, Clementi Polyclinic

Efficiency Medal

MS TAN TING TING CHRISTINA
Service Team Leader, Bukit Batok Polyclinic

MS THAM MIEW KUM
Patient Care Assistant, Clementi Polyclinic

MOH Nurses’ Merit Award 2021

MS SEAH HUI MIN
Nurse Manager, Pioneer Polyclinic

MS FATIMAH BTE ENDUT
Nurse Clinician, Choa Chu Kang Polyclinic

NUHS Nightingale Award 2021

MS CHNG LING LI
Senior Staff Nurse, Queenstown Polyclinic

MS GISELLE LI YUN RUI
Infection Control Nurse, Nursing Administration

MS KIM RUI NING
Senior Staff Nurse, Pioneer Polyclinic

MR LEE CHENG HUNG THOMAS
Senior Staff Nurse, Bukit Batok Polyclinic

MS VASANATHA D/O SUPRAMANIAM
Senior Staff Nurse, Choa Chu Kang Polyclinic

NUHS Educators’ Day Awards 2021

NUHS Teaching Excellence Award

DR SIAU KAI RONG
Family Physician, Pioneer Polyclinic

DR TAN SI HUI MELISSA
Family Physician, Jurong Polyclinic

MS JEANETTE WONG JIN YEE
Assistant Nurse Clinician, Jurong Polyclinic

MS YEO SHUHUI
Senior Staff Nurse, Choa Chu Kang Polyclinic

MS YEO XIU LIN
Senior Physiotherapist, Clinical Services

NUHS Young Clinician Mentor Award

DR BEH CHUN YEN
Family Physician, Jurong Polyclinic

NUHS Inter-Professional Teaching Award

MS LYNETTE GOH MEI LIM
Principal Dietitian, Clinical Services

MOH Nurses’ Merit Award 2021

MS SEAH HUI MIN
Nurse Manager, Pioneer Polyclinic

MS FATIMAH BTE ENDUT
Nurse Clinician, Choa Chu Kang Polyclinic

NUHS Nightingale Award 2021

MS CHNG LING LI
Senior Staff Nurse, Queenstown Polyclinic

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Senior Staff Nurse, Bukit Batok Polyclinic

MS VASANATHA D/O SUPRAMANIAM
Senior Staff Nurse, Choa Chu Kang Polyclinic
The National University Polyclinics (NUP) was established on 17 March 2017 as the primary care arm of the National University Health System.

As part of the Ministry of Health’s restructuring of the public healthcare system in 2017, NUP was formed to provide affordable, accessible, comprehensive and coordinated primary care to the western region of Singapore’s population.

NUP polyclinics include:
1. Bukit Batok Polyclinic
2. Bukit Panjang Polyclinic
3. Choa Chu Kang Polyclinic
4. Clementi Polyclinic
5. Jurong Polyclinic
6. Pioneer Polyclinic
7. Queenstown Polyclinic
8. Tengah Polyclinic (upcoming)
9. Yew Tee Polyclinic (upcoming)