

SHBC 2023 SCIENTIFIC COMPETITION
ACCEPTED ABSTRACTS
ABSTRACT CATEGORY: Health Professions Education

Abstract Details	
Abstract ID	Clinical Specialty
SHBC1355	Psychiatry
<p>Authors A.Y.P. WONG¹, L.P.L.TAN¹, J.S.DHALIWAL¹, S.L.SOH¹, D. H. T. CHEN¹, S. H. LOH¹ ¹Tan Tock Seng Hospital (Singapore)</p> <p>Title Development and Evaluation of a New eLearning Teaching Module for Basic Psychiatry Education among Nurses and Other Frontline Hospital Staff</p> <p>Background & Hypothesis Psychiatric disorders pose a significant burden on global healthcare systems, necessitating a nursing workforce with knowledge in basic psychiatry. Traditional teaching methods often fall short in efficiently educating a large number of nurses. This study aimed to develop and evaluate a new eLearning teaching module to enhance nurses' knowledge and understanding of basic psychiatry topics.</p> <p>Methods A mixed-methods approach was employed to design and assess the effectiveness of the eLearning teaching module. It consisted of interactive multimedia content, quizzes, case studies, and discussion groups. 298 nurses and frontline hospital staff participated in the module. Pre- and post-module assessments were conducted to measure knowledge gains. Participants' satisfaction and perceived usability of the module were assessed through surveys</p> <p>Results Analysis revealed improvement in participants' knowledge scores after completing the eLearning teaching module ($p < 0.0001$). The average pre-module Anxiety knowledge score out of 5 questions was 2.88, 95% CI [2.73, 3.04], while the post-module knowledge score increased to 4.06, 95% CI [3.93, 4.19]. The average pre-module Depression knowledge score was 2.70, 95% CI [2.55, 2.86], while the post-module knowledge score increased to 3.88, 95% CI [3.75, 4.00]. The average pre-module Psychosis knowledge score was 2.53, 95% CI [2.38, 2.67], while the post-module knowledge score increased to 3.51, 95% CI [3.36, 3.66]. Qualitative feedback from participants indicated high levels of satisfaction with the module's content, interactivity, and user-friendliness.</p> <p>Discussion & Conclusion The findings of this study demonstrate the effectiveness and feasibility of utilizing eLearning teaching modules to educate a large cohort of nurses on basic psychiatry topics.</p>	

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Abstract ID	Clinical Specialty
SHBC1420	Public Health / Clinical Epidemiology
<p>Authors S.MUJUMDAR³, M.S WONG², W. L.N YEE¹ ¹Institute of Healthcare Quality (IHQ) (Singapore), ²Khoo Teck Puat Hospital (Singapore), ³National Healthcare Group Corporate Office (Singapore)</p> <p>Title Patient Safety and Quality Improvement Training as an Integral Part of Ongoing Professional Education: Overcoming Hurdles</p> <p>Background & Hypothesis NHG's Institute of Healthcare Quality (IHQ) offers twenty Quality Improvement/Patient Safety courses, which were conducted as physical workshops with experiential learnings and projects. In 2020, the Covid-19 outbreak resulted in only 14% of our scheduled runs being completed because of lockdowns/social distancing measures. Cross-institutional movements were restricted resulting in unavailability of trainers/training space. Realizing the importance of these training programmes, IHQ's aim was to continue providing these despite constraints.</p> <p>Methods Existing curricula were reviewed/adapted to virtual platform needs, including interactive activities. Zoom was used as the virtual platform mode. Frequent breaks were provided to reduce screen/eye fatigue. Virtual platform training was provided to faculty/facilitators/administrative staff. IHQ tracked the number of runs/training places for each course, to see whether NHG institutions' projected needs were met. Participants' evaluation was monitored and used to revise/enhance training material/modality.</p> <p>Results Targeted runs' completion rate increased from 14% (2020) to 68% (2021) and 112% (2022) respectively. Fulfilling training places rate increased from 20% in 2020 to 97% and 90% in 2021 and 2022 respectively. Participants' Evaluation rate received Excellent/Good rating by 85-90% participants. Four new courses were added: Patient Safety (Intermediate Level), Developing Driver Diagrams, Human Factors in Healthcare and 3-Tiered Standards and Accreditation Certification Programme. The 2020 cost savings of S\$137,400 were channelled back to purchasing virtual training technical tools/license(s).</p> <p>Discussion & Conclusion Determination, perseverance, effective information technology and change management were key elements to manage evolving training needs with desirable results.</p>	

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Abstract ID	Clinical Specialty
SHBC1448	Public Health / Clinical Epidemiology
<p>Authors T.Y.WONG¹, F.L.A CHIA¹ ¹Tan Tock Seng Hospital (Singapore)</p> <p>Title Impact of Covid-19 pandemic on National Healthcare Group (NHG) clinician-educators' well-being – factors, concerns and coping responses</p> <p>Background & Hypothesis The Covid-19 pandemic resulted in complete stoppage of clinical training and resumption with stringent safety measures. While psychological impact of Covid-19 on healthcare workers/students are well described, less is known its impact on clinician-educators (CEs) who have dual roles – clinical and teaching. This study aims to assess factors, psychosocial concerns & coping responses associated with well-being of NHG CEs during the pandemic.</p> <p>Methods CEs were invited to participate in a self-administered survey in April-May 2022. Questionnaire comprised questions related to sociodemographic data, Covid-19 work-related factors, psychosocial concerns and self-rated health status. The Brief Coping Orientation to Problems Experienced (COPE) questionnaire¹ assessed coping strategies.</p> <p>Results There was 145 participants, majority Female (61.7%), between 21-40 years old (58.1%) and had been CEs for less than 10 years(68.1%). Majority (55.3%) rated their health status as “Excellent” or “Good”. 2/3 of participants felt that the pandemic had a negative impact on their well-being. Male gender, fair/poor self-rated health, difficulty juggling clinical and educational duties, perception of inadequate institutional support and increased clinical responsibilities were significantly associated with negative impact on well-being Logistic regression analysis showed self-rated health and stresses from increased clinical responsibilities were significantly associated (p<0.001). The COPE inventory showed no differences in coping responses between both groups. Problem solving (3.13±0.56) and positive thinking (3.10±0.49) ranked higher compared to avoidance as coping strategies (1.74±0.39).</p> <p>Discussion & Conclusion CEs have unique challenges in a pandemic and were negatively impacted. Further efforts should focus on supporting CEs.</p>	

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Abstract ID	Clinical Specialty
SHBC1474	Endocrinology
<p>Authors A.J.GOFF¹, Y.N.THAM², C.J.LIM², K.W.THAM² ¹Singapore Institute of Technology (Singapore), ²Woodlands Health (Singapore)</p> <p>Title Healthcare professionals in Singapore display weight bias</p> <p>Background & Hypothesis Weight bias and obesity stigma are prevalent across many sectors, including within healthcare settings. However, weight bias amongst healthcare professionals in Asia is underexplored.</p> <p>Methods Qualified healthcare professionals in Singapore were invited to participate in an online, cross-sectional survey (March 2023), consisting of demographic and work-related questions, plus the Fat Phobia Scale (FPS) and Antifat Attitudes Questionnaire (AFA).</p> <p>Results Two-hundred and thirty-one qualified healthcare professionals responded to the survey. Mean FPS was $3.19/5 \pm 0.20$, and AFA was $3.20/9 \pm 1.25$, with higher scores reflecting increased weight bias. These differences were not statistically significant. There was a trend towards lower AFA scores in medics vs non-medical healthcare professionals (AFA $3.13/9 \pm 1.31$ versus $3.29/9 \pm 1.30$) plus those who gained entry-level qualification abroad versus those who trained in Singapore (FPS $3.18/5 \pm 1.40$ versus $3.31/5 \pm 1.30$, AFA $3.18/9 \pm 1.40$ versus $3.31/9 \pm 1.30$). There was no statistical difference when comparing the number of years post-qualification. Only 16% of qualified healthcare professionals attended formal obesity-related training and were observed to have lower weight bias scores (FPS $3.11/5 \pm 0.18$ versus $3.20/5 \pm 0.19$, AFA $3.06/9 \pm 1.18$ versus $3.28/9 \pm 1.28$).</p> <p>Discussion & Conclusion This is the first large-scale, multi-profession investigation of weight bias in Asia. Our findings reveal that a large portion of healthcare professionals in multi-ethnic Singapore display weight bias. Understanding the connection between weight bias and possible obesity stigma amongst healthcare professionals may help to inform initiatives to tackle these issues and positively impact healthcare delivery to people living with obesity.</p>	

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Abstract ID	Clinical Specialty
SHBC1478	Endocrinology
<p>Authors A.GOFF¹, M.LEE², KW.THAM²</p> <p>¹Singapore Institute of Technology (Singapore), ²Woodlands Health (Singapore)</p> <p>Title Qualified and student healthcare professionals in Singapore display explicit weight bias.</p> <p>Background & Hypothesis Weight stigma is prevalent in society and healthcare professionals are not immune to such bias. This can negatively impact the quality of healthcare delivered as fear of stigma can lead to persons with obesity delaying or avoiding treatment.</p> <p>Methods Qualified and student healthcare professionals in Singapore participated in an online, cross-sectional survey in March 2023. Participants answered general demographic and categorical questions, plus the Fat Phobia Scale (FPS) and Anti-Fat Attitudes Questionnaire (AFA). Factors associated with degree of weight bias were also explored.</p> <p>Results Among 558 participants, the mean total FPS was 3.19/5.00 (range 2.00-3.86) and total AFA score was 3.20/9.00 (range 0.00-6.85) suggesting inherent weight bias. Males had significantly higher mean FPS scores compared to females (3.22 ±0.20 vs 3.18 ± 0.20, p= 0.017). No significant differences were observed in total FPS scores between subgroups for ethnicity and BMI. Those who were underweight had significantly lower Total AFA compared to those of normal and higher body weight categories. Caucasians were noted to have lower AFA willpower scores compared to Chinese, Indian or 'other' while Malays reported lower AFA dislike scores than Chinese. Importantly, 71% of correspondents felt that weight stigma had not been adequately addressed in their clinical setting.</p> <p>Discussion & Conclusion This is the first large-scale study revealing a high level of weight bias among healthcare students and professionals in an Asian healthcare setting. Addressing such bias toward persons with obesity may be crucial to reduce barriers towards obesity prevention and treatment.</p>	

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Abstract ID	Clinical Specialty
SHBC1573	Psychiatry
<p>Authors J.W.Y. KEE¹, H.RAHMAN¹, G.Y.T. SIEW¹ ¹Tan Tock Seng Hospital (Singapore)</p> <p>Title Forming a sustainable Balint Based Group (BBG) – experiences from COVID and beyond</p> <p>Background & Hypothesis Balint Groups involve regular small group clinician meetings to discuss emotionally demanding cases. Led by a group leader and based on psychotherapeutic principles, they allow participants to attain a deeper appreciation of the patient's feelings and their own. On a macro level, Balint Groups are examples of Institutional Exchange Forums which build resilience and reduce burnout.</p> <p>Methods At the height of the COVID pandemic, the Department of Psychiatry founded regular Balint Based Group (BBG) meetings for junior doctors posted to the Department. In this review, we share our lessons learnt and experiences in establishing and sustaining such groups.</p> <p>Results The following factors were identified in ensuring the effectiveness and sustainability of BBGs: 1. Authenticity: Ensuring case-presentations are focused on patient-doctor relationship 2. Psychological safety: Establishing confidentiality as part of each session 3. Commitment: Two leaders appointed for cross cover and ensure sessions proceed. 4. Prioritisation: Influencing culture by protecting time during work hours for BBGs 5. Inclusivity: Short term trainees also invited to participate in and enrich the group experience 6. Administrative support: Ensuring that online options were available during COVID and subsequently quiet rooms to run sessions with timetable reminders to the whole Department.</p> <p>Discussion & Conclusion By obtaining support from junior and senior clinicians, BBGs have ensured sustainable safe spaces for difficult patient-clinician encounters to be discussed. Future work is underway to describe effects of such BBGs in reducing burnout, building resilience and empathy.</p>	

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SHBC1574	Psychiatry
<p>Authors J.W.Y. KEE¹ ¹Tan Tock Seng Hospital (Singapore),</p> <p>Title Flipping the classroom with Google: a novel approach integrating Gagne's instructional theory.</p> <p>Background & Hypothesis Google classrooms is an established learning management system given its ease and accessibility. For effective learning, technological tools must be utilised purposefully. We describe Google classrooms as a teaching tool, integrating Gagne's theory of instruction.</p> <p>Methods Fourth-year medical students on a three week hospital-based Psychiatry rotation completed an interactive blended-learning flipped-classroom module, "depression and suicide risk assessment". Five asynchronous online micro-lessons with fourteen assignments were hosted on Google classrooms over two weeks. Integrating Gagne's theory of instruction, learning activities were intentionally designed to gain attention, stimulate recall, share learning objectives, present digital learning materials, provide guidance, elicit performance, formative assessment and feedback. Opportunities for theoretical practice through case-based discussions and the module's culminating practicum, a simulated patient clinical interview; were conducted during the final weeks' in-person clinical tutorials.</p> <p>Results Eighteen medical students completed the module and demonstrated significant improvement in knowledge and attitudes towards depression and suicide ($p < 0.01$). They were more likely to complete assignments (98.4%) compared to a concurrent "education as usual" Google classroom (36.9%). When surveyed, 88.9% of students would recommend this module to their peers and agreed that this instruction modality be replicated for other broad topics such as anxiety and psychosis.</p> <p>Discussion & Conclusion Integrating Gagne's instructional design, we successfully utilised Google classrooms to deliver an effective teaching module, accomplishing the learning outcomes with high participation and satisfaction rates. Digital learning tools with varied sensory modalities catered for differing learning preferences. Asynchronous online micro-lessons provided flexibility, enabling self-directed adult learning. Teaching events promoted interactivity between peers and tutors, facilitating social learning.</p>	

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Abstract ID	Clinical Specialty
SHBC1646	Psychiatry
<p>Authors X.E.LEE², WINNIE L. TEO¹, H. RAHMAN² ¹National Healthcare Group HQ (Singapore), Tan Tock Seng Hospital (Singapore)</p> <p>Title “Balint outside the Balint” – side effects of a structured institutional exchange forum.</p> <p>Background & Hypothesis Balint Groups have been shown to support healthcare professionals’ understanding of case dynamics, awareness of self’s and patient’s emotion hence alleviate burnout. The Tan Tock Seng Hospital (TTSH) Psychiatry Department instituted a programmatic Balint Based Group (BBG) intervention aimed at providing a structured reflective space for junior doctors to share and learn from one another about difficult situations during clinical encounters.</p> <p>Methods Monthly BBG sessions were scheduled as part of the department’s Continuing Professional Education (CPE) programmes. In each 60-minute session, a challenging case evoking strong personal emotions and struggle was presented, and participants shared their reactions and thoughts about the case, with trained leader present. For this study, 10 participants were interviewed about their experiences in the BBGs.</p> <p>Results In addition to developing self-awareness, participants articulated some unexpected “side effects” of the BBGs: a sense of inclusion into a collective experience shared with seniors, a broadened perspective, as well as motivation to create a safe space for others in the department to share about their responses to difficult patient encounters. This “Balint outside the Balint” effect resulted in the junior doctors reaching out to check on colleagues, for example ward nurses, to ask them about their patient encounters.</p> <p>Discussion & Conclusion BBGs were planned as a structured forum to facilitate learning about patient encounters amongst junior doctors. In addition to facilitating self-management, participants articulated that this forum has motivated them to initiate compassionate check-ins with their colleagues, and in doing so, contributed to trusting teamwork in the department.</p>	