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by SINGHEALTH DUKE-NUS ACADEMIC MEDICAL CENTRE MCI (P) 153/04/2017

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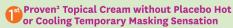
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WAR ON DIABETES:

Nurses at the front line

From disease management to education and counselling, nurses support patients with diabetes every step of the way.

By Natalie Young

ore than 400,000 Singaporeans have diabetes and the number continues to rise. If not enough is done to check the trend, one million Singaporeans could be affected by 2050.

Across SingHealth's hospitals and polyclinics, nurses are at the front line, helping patients young and old to gain better control of their condition.

They work hand-in-hand with doctors and allied health professionals to provide a holistic approach to caring for patients, taking into account their emotional and social needs.



FROM CHILDHOOD TO ADOLESCENCE

At KK Women's and Children's Hospital, Nurse Clinician Angela Hui supports young patients, many of whom have type 1 diabetes, and their families on the lifelong journey with the disease. As a diabetes nurse educator, she counsels and trains patients and their family members on how to manage their blood glucose levels and administer insulin injections. "Our care extends beyond the hospital. We journey with them from as early as their preschool years till after they turn 16 and transit to a hospital for continued care," said Ms Hui.



FROM ADOLESCENCE TO ADULTHOOD

Nurse Clinician Lim Huee Boon co-runs the Young Adult Diabetes Clinic at the Diabetes and Metabolism Centre, Singapore General Hospital, for patients who are at least 17 years old. The one-stop Centre also offers endocrinology, renal, vascular surgery, podiatry and vitreo-retinal services for adult patients. To help patients manage their type 1 diabetes more effectively, Ms Lim conducts the Dose Adjustment for Normal Eating (DAFNE) programme which teaches participants to calculate the insulin they need for the amount of carbohydrates in each meal.



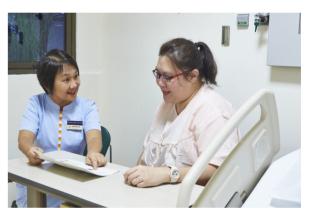
HEART-RELATED COMPLICATIONS

At the National Heart Centre Singapore, about 50 to 60 per cent of patients with heart conditions also suffer from type 2 diabetes. In the cardiothoracic intensive care unit and ward, Advanced Practice Nurse Dahliana Idris (centre) keeps a close watch on these patients undergoing heart-related surgery as poor appetite and lack of rest after surgery can elevate their blood sugar level. She also works with pharmacists, dietitians and physiotherapists to ensure that patients' medication, dietary and rehabilitation needs are met. For patients who require specialist care, she refers them to the Diabetes and Metabolism Centre.



EYE-RELATED COMPLICATIONS

Poorly controlled diabetes can result in progressive damage to the retina, and increase the risk of other eye conditions such as cataract and glaucoma. If left untreated, it may lead to blindness. At the Singapore National Eye Centre, Senior Staff Nurse Desiree Wong cares for elderly patients who struggle to control their diabetes and are at risk of losing their vision. She advises them on caring for their eyes before and after laser treatments and intravitreal injections.



REDUCING HOSPITAL READMISSIONS

When patients do not follow their treatment plan, they often end up in hospital due to acute diabetes complications such as hypoglycaemia or hyperglycaemia. "Every patient is unique. It's important to understand their situation and why they don't follow the treatment plan," said Nurse Clinician Tham Yim Leng, Sengkang Health. To ensure patients remain well-supported after their discharge from hospital, Ms Tham works closely with the multi-disciplinary team to develop personal care plans for them.



DIABETES IN PREGNANCY

Women with gestational diabetes have a greater chance of developing type 2 diabetes after their pregnancy. Nurses like Ms Asmira Mohamed Rahim are on hand to help expectant mothers keep their condition in check. The Nurse Clinician at KK Women's and Children's Hospital often encourages them by sharing her own experiences as a mother of three. She teaches them to monitor their blood sugar levels and advises them to eat healthily and exercise regularly even after their pregnancy.



MANAGING DIABETES

Together with her integrated care team at Bedok Polyclinic, Senior Staff Nurse Roslinda Sadon cares for 6,000 patients with chronic diseases like diabetes and hypertension. She reviews their blood tests and arranges for diabetic foot and eye screening to identify complications early and prevent their condition from worsening.

IN SINGAPORE:



About 1 in 2
people who suffer a heart attack
have diabetes



ZIN 3 new kidney failure cases were due to diabetes



2 in 5 people who suffer a stroke have diabetes



About 4

people with diabetes undergo an amputation every day due to complications arising from the disease

SOURCE: MINISTRY OF HEALTH

Nursing is not a job, it's a calling. A calling to give much-needed care and compassion to patients during their time of need and illness; a calling to ensure patients receive the right medication and treatment to put them on the road to recovery; a calling to innovate for better care and train generations of nurses to be well equipped for future challenges. Nurses, you are the PRIDE OF SINGHEALTH.

PROF IVY NG GROUP CEO, SINGHEALTH

No one spends more time showing patients a generous dose of compassion and providing emotional support than a nurse does. It takes someone special to do this. You deserve our profound gratitude and respect. Happy Nurses' Day to our dedicated nursing professionals!

PROF SOO KHEE CHEE
DEPUTY GROUP CEO (RESEARCH &
EDUCATION), SINGHEALTH & DIRECTOR,
NATIONAL CANCER CENTRE SINGAPORE

Beyond medical needs, you take care of our patients' emotional and social needs, involving them in their care decisions, empowering them to take charge of their well-being and putting them on the road to faster recovery. Thank you for always looking out for what matters most to our patients and their loved ones.

PROF FONG KOK YONG
DEPUTY GROUP CEO (MEDICAL & CLINICAL
SERVICES), SINGHEALTH

Someone once said, "Just as you don't build a house without its foundation, you don't build a hospital without its nurses." Today, our nurses are in our hospitals, polyclinics and community, healing, caring and comforting patients and their families. You're special and you make others feel special too.

ADJ PROF LEE CHIEN EARN DEPUTY GROUP CEO (REGIONAL HEALTH SYSTEM), SINGHEALTH & CEO, CHANGI GENERAL HOSPITAL



Dear nurses, you are recognised for providing high standards of care and the all-important human touch. You continually seek ways to improve care outcomes and patients' experience. Tireless, you remain at the forefront of health care advances and evolving changes. Fearless, you adapt and innovate. It's humbling and inspiring to work alongside you every day!

PROF KENNETH KWEK
DEPUTY GROUP CEO (ORGANISATIONAL
TRANSFORMATION & INFORMATICS),
SINGHEALTH & CEO, SINGAPORE
GENERAL HOSPITAL

An ADN shared that her most joyous moment was not about accolades but a patient's recovery: "The happiest moment of my 20+ years of service was when this young lady fought her fears and gingerly found her way back to our ICU, where she had spent months at the brink of death, to thank us." This is a real celebration!

PROF CHRISTOPHER CHENG

Our nurses embody compassion and commitment in delivering holistic patient care, and inspire with their warmth and exemplary professionalism. I am deeply impressed by their passion and unceasing efforts to enhance patient safety and care through clinical innovation, education and research. Nurses, thank you for spurring us on to provide excellent health care for patients.

PROF ALEX SIA
CEO, KK WOMEN'S AND CHILDREN'S HOSPITAL

You inspire us with your teamwork and innovative spirit in the face of increasing demands. Your discipline and commitment to ensure safe care for all our patients is truly exemplary. Happy Nurses' Day!

ASSOC PROF POON CHOY YOKE DIRECTOR,
NATIONAL DENTAL CENTRE SINGAPORE

At every care point, patients need our healing touch, empathy and reassurance. You take the time to listen to their worries and allay their fears, caring for them with dedication and compassion. You touch their hearts with your warmth. Thank you, nurses, for being our pride and inspiration!

PROF TERRANCE CHUA GROUP CHAIRMAN MEDICAL BOARD, SINGHEALTH & MEDICAL DIRECTOR, NATIONAL HEART CENTRE SINGAPORE

Nurses are the backbone of our health care system. You bring care and warmth, comfort and healing, to make that difference in our patients' lives. Every day is a selfless, dedicated work of heart. Thank you for the wonderful job you do. Enjoy Nurses' Day!

ASSOC PROF NG WAI HOE
DEPUTY GROUP CHAIRMAN MEDICAL BOARD,
SINGHEALTH & MEDICAL DIRECTOR,
NATIONAL NEUROSCIENCE INSTITUTE

Dear nurses, here's a big
"Thank You" for caring for the
thousands of patients who seek
treatment at Singapore National
Eye Centre each year. Your
dedication and compassion has
touched and comforted many.
You continue to make a
difference every day; you are
indeed our superheroes.

PROF WONG TIEN YIN
MEDICAL DIRECTOR,
SINGAPORE NATIONAL EYE CENTRE

Nurses, you give your best every day. The vital work that you do requires patience, persistence and passion. You actively support patients and their caregivers across different settings, calming their anxieties and relieving their discomfort with care and professionalism. You are an inspiration to everyone. Happy Nurses' Day!

MS MARGARET LEE
CEO, SINGHEALTH COMMUNITY HOSPITALS

Nursing is more than a profession – it is an "Art" with a "HeART". Our nurses create and practise the Art of Nursing on a daily basis when caring for our patients. You listen to understand and give strength when hearts are weary. You nourish with care and compassion. Thank you for making a positive impact.

DR ADRIAN EE
CEO. SINGHEALTH POLYCLINICS

Lean on me

Nurse-initiated support groups such as these two let cancer patients know they are not alone in their journey. By Linda Lim

hen Singapore General Hospital (SGH) Senior Nurse Clinician Ong Choo Eng first met Mr Ellil Mathiyan Lakhsmanan, he had just undergone surgery for colorectal cancer and been given a stoma bag to wear for life. His biggest fear was not being able to do the things he enjoyed, like swimming and cycling. That was when Ms Ong introduced him to a colorectal cancer survivor who helped him realise that life did not have to change.

Seven years on, Mr Ellil still leads an active lifestyle, swimming and cycling – all with a stoma bag. Having benefited from the guidance and support he received from other cancer survivors, he wanted to pay it forward by reaching out to other cancer patients by volunteering his time as a patient ambassador with the Colorectal Cancer Support Group.

The support group, led by a multidisciplinary team from SGH and the National Cancer Centre Singapore (NCCS), provides resources and emotional support for patients. Some of them need to wear a stoma bag for life to help divert the flow of body waste from their abdomens. "Patients tend to think they are the only ones wearing a stoma bag," said Ms Ong, who is one of the pioneer SGH nurses who started the group. "When they get to meet others who are in the same situation as them and see how well they are coping with the stoma bag, they find solace in knowing they are not alone. They are also more convinced that they can lead a normal life."

The support group, which has over 80 active members, meets once a month



Senior Nurse
Clinician Ong Choo
Eng (in uniform)
with members of
her support group
for colorectal cancer
patients.

in addition to weekly educational talks on topics such as pre- and post-surgery care that are organised for patients and their caregivers.

Ms Ong teaches patients how to wear, clean and change their stoma bags. She also advises them on diet and rehabilitation.

A good part of her time is spent on addressing patients' concerns on how the stoma bags will affect their work and daily life. She also connects them with cancer survivors who have taken on the role of patient ambassadors in the support group.

"A lot of queries are answered when patients see the ambassadors managing well and feeling at ease with their stoma bags," she said. The group has 10 ambassadors who take turns to visit patients in the wards.

Having cared for patients with colorectal cancer for over 30 years, Ms Ong feels a sense of achievement whenever a patient gains confidence and is able to cope well with the condition. "I am honoured to be a part of one of the biggest active patient support groups in Singapore," she said.

Being part of a support group has

proven to be just as rewarding for Advanced Practice Nurse Julia Eng, Assistant Director of Nursing, KK Women's and Children's Hospital (KKH), who has been volunteering at the KK Women's Cancer Support Group at KKH since 2000.

Started by a team of nurses and allied health professionals, the support group has been reaching out to patients with gynaecological cancers since 1991. In addition to peer support programmes and counselling sessions, newly diagnosed patients and their family members also get to hear from cancer survivors about their experiences. The programmes help caregivers prepare themselves for what their loved ones might be going through.

"It's more assuring to hear from someone who has lived through the same thing. The real-life experiences and tips by members on how to manage the side effects of their treatment cannot be gained from books," said Ms Eng.

She recalled how a patient had reacted adversely to cancer treatment, resulting in lower limb weakness. "We introduced her to a volunteer who went through the same experience and it made her realise she was not alone in fighting the disease. Over time, she became more positive and motivated to overcome her disability," said Ms Eng.

Inspiring stories like these never fail to inspire Ms Eng to do more for her patients. And her efforts have been spurred by her patients and their families' positive responses. "The encouraging words from them motivate us to continue doing what we do, if not better!" she said.



APN Julia Eng
(second from left)
sharing a light
moment during
a support group
session with
gynaecological
cancer survivors.



"As our health care system transforms to meet future needs, care will shift from hospitals to the community. Nurses who form the core of our health care workforce will play a key role, partnering with health care professionals, patients and their caregivers in different settings to ensure patients remain well-supported in the community and home. I encourage all of you to seize the opportunities to grow and deepen your roles. Thank you for your dedication, commitment and unwavering resilience in giving your best to your patients."

MS TAN SOH CHIN CHIEF NURSING OFFICER MINISTRY OF HEALTH

"We're living in exciting albeit challenging times as our health care system evolves. As nurses, you're change makers who have a hand in shaping the way care is delivered now and in the future. Thank you for staying true to your calling to comfort and heal as you provide care to our patients across the continuum; acting as their eyes and ears to ensure their optimal well-being and safety. Be adaptable and resilient as you take on new challenges head-on.'



DR TRACY CAROL AYRE GROUP CHIEF NURSE, SINGHEALTH & CHIEF NURSE.

MS PAULIN KOH DEPUTY GROUP CHIEF NURSE, SINGHEALTH & CHIEF NURSE, CHANG

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MS MAGHESHWARI R K SABAPATHY ASSISTANT DIRECTOR, NURSING BRIGHT VISION HOSPITAL

Changing lanes

Making a career switch was like responding to a calling for these nurses.

Mr Low Chin Poh, 47 SENIOR STAFF NURSE, PALLIATIVE CARE WARD, **BRIGHT VISION HOSPITAL (BVH)**

PREVIOUS JOB: ENGINEER

Fourteen years ago, Mr Low Chin Poh witnessed a paramedic resuscitating an accident victim, and was inspired to join a profession to help people in need. His family was initially sceptical about his decision to leave his stable engineering job, but was eventually moved by his determination. He signed up for Nanyang Polytechnic's Professional Conversion Programme in Nursing and was part of the pioneer batch in 2003.

He joined BVH in 2005 as a staff nurse in the community rehabilitation ward and was recently transferred to the palliative care ward to look after terminally ill patients. The loving father of two said that his nursing skills have also enabled him to care for his family and friends when they fall sick. Breaking preconceived notions about nursing being a career for women, he said: "It's for anyone who is passionate about caring for others."

Ms Cheng Khor Xin, 34 SENIOR STAFF NURSE, HIGH DEPENDENCY NURSERY. SINGAPORE GENERAL HOSPITAL (SGH)

PREVIOUS JOB: MICROBIOLOGIST

It didn't take long for microbiologist Cheng Khor Xin to realise that laboratory bench work wasn't her cup of tea. Still, she stayed on for four years before taking a leap of faith and enrolling in a nursing diploma programme at Nanyang Polytechnic in 2010.

Since graduation, she has been working at Singapore General Hospital's neonatal ward, caring for babies in the high dependency nursery. "I get to nurse them back to health," she said with pride.

At the same time, she also feels the pain of seeing the little ones struggle to survive. "It's challenging but the job really keeps me in touch with the fragility and brevity of life. This is something I treasure."

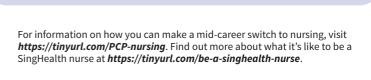


Ms Clara Lam, 32 SENIOR STAFF NURSE, PAEDIATRIC HOMECARE NURSING, KK WOMEN'S AND CHILDREN'S HOSPITAL (KKH)

PREVIOUS JOB: BIOMEDICAL TECHNICAL OFFICER

Ms Clara Lam's interest in health care was sparked off by a part-time stint at a private hospital registering births. She joined KKH as a Biomedical Technical Officer soon after completing her Diploma in Biomedical Informatics and Engineering. Her job often brought her to the children's wards, especially the Children's Intensive Care Unit (CICU), and seeing the nurses there in action sparked her interest in

the profession. She enrolled in the Professional Conversion Programme in Nursing and returned to KKH as a nurse for critically-ill children in the ICU. Now, as part of the homecare nursing team, she provides homecare support for children after discharge and equips their caregivers with the necessary skills. "Being able to assure my patients and their parents that they are not alone in their journey has made my work even more fulfilling," she said. Her advice to those thinking of pursuing a career in nursing is simple - "It is never too late. If you are ready to share your love, join us!"



Aday in the life of...

...Assistant Nurse Clinician Ivy Tay of the Emergency Medicine Department, Singapore General Hospital. By Annie Tan

ach day, some 300 patients are seen at the Singapore General Hospital's Emergency Medicine Department. Assistant Nurse Clinician Ivy Tay handles as many as five cases simultaneously. The high patient volume and wide variety of cases means she has to think on her feet and make split-second decisions.

Although it's demanding and fast-paced, the air stewardess-turned-nurse loves the nature of her job, and says nothing beats the immense satisfaction of seeing her patients recover. While no two days are the same, Ms Tay follows an organised schedule during her shift.



7am Gall geared up

Her day starts off with a morning roll call with 40 nurses, after which Ms Tay makes her rounds, checking that all medication supplies and equipment in the department such as the defibrillators and electrocardiography (ECG) machines are functioning well.



8am

G ATTENDING TO TRAUMA CASES

As she moves around the department to ensure a smooth handover from the night shift nurses to the morning shift team, a message comes in via very high frequency (VHF) radio from a Singapore Civil Defence Force (SCDF) ambulance to alert them to an emergency case that is one to three minutes away. Time is critical in these cases, so Ms Tay and her colleagues quickly get ready and stand by at the ambulance drop-off point (above). Once the ambulance arrives, the patient is wheeled in to the Resuscitation and Critical Care Area for further investigation.



9am

MONITORING PATIENTS IN THE RESUSCITATION ROOM (*)

At the Resuscitation and Critical Care Area, Ms Tay monitors patients' ECGs, administers medications, and conducts necessary medical investigations. Sometimes, as a senior member of the team, she has to be on hand to provide additional support when doctors update family members on the conditions of critically ill patients.



10.30am

G BREAK TIME

Nurses take their breaks at different times, and Ms Tay usually gets an early to-go lunch from the cafeteria to eat in the staff pantry. She uses this time to unwind and recharge for the rest of her shift.



11.15am - 3.30pm

G TRIAGING PATIENTS

As the pace picks up, Ms Tay steps into the triage area to prioritise patients according to the severity of their medical conditions so that they can be quickly attended to by a doctor. She checks their vital signs and medical history, and conducts necessary investigations.



3.30pm

UPDATING FAMILY MEMBERS

For the rest of her shift, Ms Tay updates family members at the waiting area and attends to their requests. Family members may ask to stay with their loved ones in the critical care area, which is usually not allowed. Ms Tay makes exceptions when she knows it's important for patients who suffer from dementia or are confused and agitated to have their family members nearby.

4.00pm

OCHECKING IN ON JUNIOR NURSES

Around 4pm, Ms Tay checks in with the junior nurses under her charge to ensure they are coping well. She then does a detailed patient handover to the night shift team, alerting them to priority cases. Her day comes to an end with a final walk-through in the Emergency Medicine Department.





Nurse Clinician Wong Yoke Hui believes that continuing education is imperative for nurses to provide effective care for patients with complex conditions.

It was worth it!

She proves that the learning never stops, even when it means juggling multiple roles at the same time.

By Annie Tan

urse Clinician Wong Yoke Hui lives by the mantra 'aspire to be inspired before you expire". So in 2013, when she received a scholarship from Sengkang Health to pursue a Master of Nursing qualification at the National University of Singapore (NUS), her answer was a resounding "yes".

Then a Senior Staff Nurse, Ms Wong, 22 modules, covering topics such pharmacology, palliative care, health policy and management, and health care ethics.

She said it was an "intense four semesters" juggling her studies with work and family needs. "But it was all worth it."

She graduated with flying colours and took on a supervisory role as an Assistant Nurse Clinician. Work became more challenging, but there was also greater satisfaction.

"A patient's daughter once thanked me for supporting her terminally ill mother through the final stage of her life. I couldn't have done it so effectively without the training from the Master's programme," she said.

In 2016, Ms Wong went on to complete a year-long Advanced Practice Nurse (APN) internship. This programme equips masters-trained 32, spent two years completing nurses with clinical competencies to provide complex care, and diagnose as advanced pathophysiology, and manage common medical conditions, including chronic illnesses.

> Not one to rest on her laurels, she plans to pursue a Doctorate in Nursing next.

> She explains why, for her, the learning will never stop: "The amount of knowledge needed to care for patients with complex conditions cannot come solely from the work we do in the hospital. Continuing education is essential for nurses to provide effective care."

Coming home with ideas

She's been caring for dementia patients for four years in her two decades as a nurse but a recent overseas attachment was an eye-opener for her.

By Annie Tan

fter four years of caring for dementia patients, Ms Linda Lim, Advanced Practice Nurse (APN), National Neuroscience Institute (NNI), signed up for an overseas study trip last year. She returned full of new ideas to implement here.

Ms Lim had been on a clinical attachment at the University of British Columbia (UBC) in Vancouver, Canada, a trip sponsored under Singapore's Ministry of Health's Healthcare Manpower Development Plan (HMDP).

She found that there was much to learn there.

"The UBC team has been doing great work in this field. I had the chance to learn how they run their multidisciplinary dementia clinic and shadow the health care team for three months," said Ms Lim, 40, who in 2012 was the first NNI APN to specialise in dementia.

Her attachment included sessions with UBC's genetic counsellor, medical social worker, and neuropsychologist. She gained insights into genetic testing, long-term care planning, and ways to help patients better integrate into society.

At Paul's Club, a social and recreational day care programme for patients with Young Onset Dementia, her meetings with participants and staff sparked ideas and inspired her to enhance a similar programme back home when she returned.

"Currently, our patients with young onset dementia attend a weekly threehour session, where they take part in activities such as cooking, art and computer work to keep themselves cognitively active. But the UBC programme proves it's possible to have a meaningful full-day programme. We want to do that for our patients too,"

After the attachment, Ms Lim did just that. She is looking at expanding the existing Early Stimulation, Exercise and **Emotional Support (ESTEEM) for Young** Onset Dementia programme from a three-hour weekly programme into a full day one. The programme, set up in 2015, was a joint effort between NNI and the Alzheimer's Disease Association.

She also wants to increase public awareness of the condition, and help patients and their caregivers remain well-supported in the community and at home.

Ms Lim is also working with a UBC clinical psychologist in trying to develop a support system programme for children who have parents or grandparents with dementia.

Although there were challenges being away and adjusting to a different culture, she said the trip was an opportunity she would always treasure. Her advice to young nurses who want more training is to go for such attachments.

"Set clear objectives and be bold in asking for more learning opportunities," she said.



A winning combination

A mutual love of research brought this mentor and mentee together, and both their careers benefited from it. By Esther Au Yong



Tr Chia (right) not only mitigated Ms Lim's (left) concerns and reservations about her new study on detecting chemotherapy-induced neuropathy, but also helped her refine it.

mutual love of research brought this mentor and mentee together, and both their careers benefited from it.

Chance encounters such as that between Dr Chia Yen Yen and Assistant Nurse Clinician Lim Yan Yin can be life-changing.

Ms Lim, a paediatric oncology nurse at KK Women's and Children's Hospital (KKH), met Dr Chia, Deputy Director of Nursing, KKH, by chance at a nurses' orientation in 2009.

Dr Chia was speaking about her doctoral thesis on interactions and encounters between nurses and patients in an ethnically diverse health care setting like KKH.

"Her enthusiasm piqued my interest. I was inspired by how research allows nurses to gain more insights into patients and improve care," recalled Ms Lim.

Today, Ms Lim, 28, juggles her time between clinical duties and cancer nursing research. Her mentor is none other than Dr Chia.

BY SHARING MY KNOWLEDGE, I HOPE THEY CAN REACH GREATER HEIGHTS THAN ME.

> DR CHIA YEN YEN, DEPUTY DIRECTOR OF NURSING, KKH

A SPECIAL BOND

This mentor-mentee relationship began four years after their first meeting, when they met again in 2012.

This time, Ms Lim was studying an assessment tool to detect chemotherapy-induced neuropathy, which is a side effect of chemotherapy in young children receiving chemotherapy treatment. She approached Dr Chia for advice.

"I wasn't confident that my study would make the cut, but Dr Chia saw me through my difficulties and concerns. She helped me refine the study to ensure that every aspect was addressed appropriately," said Ms Lim.

It was the beginning of their winning mentor-mentee relationship.

With Dr Chia's guidance, Ms Lim's proposal won the SingHealth Best Research Proposal Competition that year.

Encouraged by Dr Chia, and to continue her research, Ms Lim applied for the St Baldrick's Foundation's Childhood Cancer Research Grant, based in the United States, and got it.

She is now applying for a second research grant, this time from the Children's Cancer Foundation in Singapore. Her research will look at developing a cost-effective and interactive way of improving the physical and psychosocial well-being of children receiving cancer treatment.

Ms Lim has also joined the Nursing Research Fellowship Programme, which allows nurses to have protected time to carry out their research under Dr Chia's close guidance and supervision.

DEMANDING BUT INTERESTING

Ms Lim said her research journey has been daunting but interesting, and she is grateful for Dr Chia's mentoring and their open communication. Dr Chia's advice to young nurses on the same path is to "be open and unafraid to share concerns, clarify doubts and ask questions".

Dr Chia admits that nursing research is demanding and not for everyone. "It's only for nurses who love research, like Yan Yin. She is energetic, creative, and full of new ideas."

But Dr Chia said research is also about teamwork. "You must manage the diverse views of team members and the possible conflicts that arise from them."

Dr Chia considers it important to mentor the next generation of nurses, and it is a task she does with joy. "By sharing my knowledge, I hope they can reach greater heights than me," she said, recalling how constructive feedback from her academic supervisors had helped her in her doctoral thesis.

She also finds that the skills learnt through research are multiple and farranging. "Such skills help nurses not just in their daily work, but also in their lives outside of work."

EASING THE TRANSITION FOR NEW NURSES

Across SingHealth institutions, newly graduated nurses undergo a six-month onboarding programme to prepare them for their new roles and to develop their resilience and adaptability. The programme focuses on practical skills training to enable nurses to work effectively and confidently in a complex health care environment.

ORIENTATION

 Sharing on SingHealth's vision and core values, policies and practices, infection prevention and control guidelines and employee responsibilities

PRECEPTOR-GUIDED CLINICAL PRACTICE

Nurses are trained and assessed based on core skills competencies which include:

- Intravenous Administration of Medication
- Venepuncture and Cannulation
- Point of Care Testing
- Infection Prevention and Control
- Other core skills based on specialties

What's ahead

SINGHEALTH GRADUATE NURSE TRANSITION PROGRAMME

Come 2018, the SingHealth
College of Clinical Nursing will
offer a 12-month transition
programme to guide new nurses
in their first year on the job.
In addition to practical skills
training, the programme will
focus on developing soft skills
such as communication, time
management and self-awareness.

All in the family

Having a dedicated nurse for a mother steered the Seow siblings to join the profession.

By Sol E Solomon

hen the SARS outbreak hit Singapore in 2003, the whole nation went on high alert. A young boy asked his mother, Mdm Koh Lay Chun, a nurse at Singapore General Hospital (SGH), why she continued doing her job when it was so dangerous.

Her reply was to ask him who would take care of patients if nurses like her didn't. This set young Jason Phil Seow thinking, and he decided then that he wanted to be a nurse. Mr Seow, now 26, joined SGH as a staff nurse in 2011 and is currently caring for patients in the internal medicine ward.

His younger sister Crystalbel Pearlyn Seow, 24, was also inspired by their mother and followed suit, becoming a staff nurse at SGH in 2014.

Growing up, the siblings often asked their mother about her job. She would share her experiences and sometimes took them around the wards to show them what it was like to be a nurse.

"I felt very proud of my mum," said Mr Seow. "She used to tell me about her day and the satisfaction she got from helping her patients."

Mdm Koh, a Senior Enrolled Nurse, was surprised but very happy when she first learnt that both her children aspired to follow in her footsteps.

"Nursing is a profession that requires skills and a caring personality. It may not be suitable for everyone, but I'm glad that my children found this calling," she said.

While his family was supportive of his career choice, Mr Seow's friends were sceptical.

"They asked, 'Why do you choose nursing? It's a woman's job.' Some also felt that nursing is not prestigious enough but I told them otherwise. Nursing is my passion and the many opportunities to learn and grow have made me love the job even more," he said.

In 2014, Mr Seow was offered a sponsorship by SGH to pursue a degree in nursing at the National University of Singapore. He graduated in May this year.

With three nurses in the family, conversations during dinner tend to veer towards nursing. "I think it's good when you have someone in the family who is in the same line of work. When you need someone to talk to, it's easier for them to understand," said Ms Seow. "My mother and brother can always tell when I've had a challenging day at work and they never fail to lend a listening ear, give me advice, and encourage me every step of the way."



Two generations of nurses – (From left) Jason Phil Seow with his sister Crystalbel Pearlyn Seow and mother Mdm Koh Lay Chun.

Taking charge

Providing holistic care for breast cancer survivors.

By Linda Lim

ost cancer survivors fear recurrence. That is why an important part of Advanced Practice Nurse (APN) Mabel Tan's job is allaying her patients' fears of recurrence. At the Breast Cancer Survivorship Clinic, the 48-year-old sees patients who have been cancer-free for five years or more and return to the National Cancer Centre Singapore for their annual reviews.

Her day typically starts even before the clinic opens: "I prescreen the patients' mammogram results and discuss with the oncologists whether there is a need to order other investigative tests. These could be ultrasounds, biopsies, or referrals to other specialists for follow-up."

During clinic sessions, Ms Tan reviews the patient's clinical history, notes any side effects of treatments, advises her on adopting a healthier lifestyle and encourages her to go for screening for common cancers. With more than 20 years of experience under her belt, Ms Tan said that it is "never easy to break the news to patients, when a mammogram shows something suspicious, that they need a biopsy".

"It makes them anxious when they need further investigation. The emotional support that we provide is just as important as the medical treatment," she added.



APN Mabel Tan's duties at the Breast Cancer Survivorship Clinic include counselling and educating cancer survivors on leading a balanced lifestyle.

чното: ZAPHS ZHAN

Avoiding readmission



Nurses visit patients in their homes to ensure that they remain well-supported after their discharge.

By Wong Sher Maine

fter 95-year-old Mr Tan was discharged from a two-month stay at Changi General Hospital (CGH) for a lung and urinary tract infection, he needed to have a permanent urinary catheter fitted.

His two domestic helpers were unfamiliar with catheter care, but thanks to a community nurse assigned by CGH, they were taught the practical details of catheter care.

"The nurse came to train them at our home. She was very gentle and patient with my father, and he took to her. She was a great help to us," said Ms Estella Tan, Mr Tan's daughter and carer.

Apart from providing training to the carers and assessing their competency, Ms Kee Mong Nee, Assistant Nurse Clinician, CGH, also monitored Mr Tan's condition and checked whether he was taking his medication regularly, during the home visits.

Nurses like Ms Kee belong to a community care team, where nurses, doctors and allied health professionals work together to provide post-discharge care to patients in the comfort of their homes.

Many are elderly patients who have been in hospital for an extended period of at least one to two months, and need follow-up care to reduce their risk of hospital readmission. As care models in Singapore evolve to meet the needs of an ageing population, the role of nurses in the community is becoming increasingly critical.

"Patients are happier at home. I have seen many elderly patients who are sick in the wards but feel much better once they go home," said Ms Kee, who feels that she has a special "affinity for the elderly".

At Singapore General Hospital (SGH), Patient Navigators like Ms Deborah Tang, 59, serve a different group of patients. She cares for newly discharged elderly residents in Chin Swee Road and Banda Street.

"These patients live in one-room

"They know that they can give me a call for advice and emotional support," said Ms Kee Mong Nee, Assistant Nurse Clinician, CGH, seen here with Mr Tan.

Nurses like Ms Tang and Ms Kee belong to a community care team that works with newly discharged patients, and their caregivers and families, training and helping them cope.



BEING IN THE COMMUNITY ALLOWS ME TO SERVE AS A BRIDGE BETWEEN **HEALTH AND SOCIAL CARE, AND TO BE** A FRIEND TO THESE LONELY RESIDENTS.

MS DEBORAH TANG, PATIENT NAVIGATOR, SGH

rental flats and most do not have family and financial aid services for support. can give me a call for advice and to rely on. They also have complex
This enables vulnerable seniors to emotional support." health and social issues," said Ms Tang. Carrying a haversack packed with blood pressure monitors, glucometer, swabs, bandages and other items which she may need, she heads to the flats to visit 10 to 15 residents every day.

She spends about 15 to 20 minutes with each resident, monitoring their health and making sure they are keeping to their medication schedules and medical appointments. Where needed, she refers them to social care continue to live independently within the community.

Beyond providing care, these nurses give patients and their carers peace of mind.

"When there is a crisis, caregivers may become frightened. This is the biggest challenge for a newly discharged patient," said Ms Kee. She encourages carers to call her on her mobile phone.

"If there is a crisis or they face any difficulties, they know that they

Ms Kee has more than 20 patients under her charge.

"Being in the community has added a whole new dimension to my work. It allows me to serve as a bridge between health and social care, and to be a friend to these lonely residents. Sometimes they are so happy to see me because they just want someone to talk to," said Ms Tang, who has been a nurse for 42 years and finds her work with the elderly very rewarding.



Innovating healthcare

These initiatives by nurses have taken patient care and comfort to new levels. By Natalie Young

LEADING CHANGE IN PLANNING AND DESIGN

Sengkang General Hospital

Over the past two years, nurses from the upcoming Sengkang General Hospital's Department of Emergency Medicine have placed themselves in patients' shoes, simulated real-life medical situations and reviewed layouts and processes in the A&E. With colleagues from Operations, Strategic Planning and Management departments, they were involved in the planning and design of the hospital's A&E Department due for completion in the second half of 2018.

Triage, the first point of contact for patients visiting the A&E, was closely scrutinised.

"Traditionally, a nurse will conduct a primary assessment of a patient's condition before referring him to a doctor or for tests. To reduce patients' wait times and expedite investigations, we introduced nurse-initiated interventions and protocols at triage," said Nurse Clinician Muhamad Fazli Muhamad Zaidi. They identified a set of common conditions for which the triage nurse can initiate immediate medical or nursing interventions. "This improves the flow of patients and patients' pain management outcomes," he added.

Triage nurses are now empowered to order laboratory and radiological investigations such as x-rays and blood tests, as well as pain relief medication as part of the nurse-initiated interventions introduced.

The nurses also did mock-up exercises to test workflow, space requirements, and the distance between each stop to ensure a smooth patient journey.

"Through role-playing, we were



The team from the upcoming Sengkang General Hospital's Department of Emergency Medicine: (from left) Nurse Clinician Muhamad Fazli Muhamad Zaidi, Assistant Nurse Clinician Ahmad Khairil Mohamed Jamil, Senior Staff Nurse Shamala Sivamoorthy Gopalakrishnan, Assistant Nurse Clinician Hasyrina Hashim and Nurse Clinician Tan Khee Khee.

able to step into the shoes of patients and caregivers, gain insight into their needs, experiences, and improve our services. For example, the consultation area will now have more spacious phlebotomy stations. This will provide more privacy and comfort for patients when nurses draw blood samples from them," said Assistant Nurse Clinician Hasyrina Hashim.

Other major considerations in the planning and design of the new A&E Department were patient safety and infection prevention.

"When we planned the layout, we were mindful to create a designated treatment area for patients with fever," said Nurse Clinician Tan Khee Khee.

In addition, the discharge counters and pharmacy are located near the exit so patients need not pass through the different emergency care areas to get to them.

Knowing that people do not look forward to A&E visits, the team ensured that the human touch, for which there is no substitute, was not compromised.

GETTING ORGANISED

National Dental Centre Singapore

When Nurse Manager Chow Paik Choo from the National Dental Centre Singapore (NDCS) observed that nurses in the General Anaesthesia Operating Theatre (GAOT) were spending a lot of time looking for medicine supplies, she knew something was amiss.

Together with Senior Staff Nurses Serene Tan and Baby Sin, she set out to reorganise the medicine cabinets and create an inventory system to ensure there is sufficient space to store a threemonth supply of medication. On average, nurses in the GAOT handle about eight different types of medication a month.

They reorganised unused items, allocated one cabinet for medication with a fast turnover, and another for slow moving ones. They also adopted a first-in-first-out approach for commonly used medication so that other nurses could retrieve and replenish supplies quickly.

"We also started using colour-coded labels to differentiate high-risk medicines from normal ones, to prevent any potential medication error," said Ms Tan.

The planning and reorganisation, which took a couple of weeks, was time well-spent. Nurses now spend 10 minutes less searching for medication because they know which cabinet to go to for what they need. The other benefit is that they can now devote more time to patient care.



EASING BED TRANSFERS AFTER SURGERY

National Heart Centre Singapore

In the Cardiothoracic Unit, patients who have had open heart surgery and are in stable condition have the option to be transferred directly from the Post-Anaesthetic Care Unit to the Intermediate Care Area. The fast track workflow allows patients to bypass the Intensive Care Unit, minimising the number of transfers between units. Since implementation, the nurses further improved the workflow to arrange for transfers to take place the next day.

BENEFITS:

- Patients experience less pain and discomfort during the transfer.
- Surgical drains and lines are not interrupted, ensuring continuity of intravenous medications.
- Staff handover time was reduced by 30 minutes.



ALL IT TAKES IS A BAG

Singapore National Eye Centre

Pupil dilatation, which can take up to 25 minutes, is a common procedure done by nurses to diagnose eye problems. When a clinic gets busy, patients waiting for their turn tend to spill over into the waiting area. In order to shorten patients' waiting time, nurses did a little improvisation, which has gone a long way. They customised a sling bag to contain all the items they need for the procedure – from patient registration forms to hand sanitisers and eye drops.

BENEFITS:

- Nurses attend to patients faster as they no longer need to walk to and from the dilatation cabinet for supplies.
- Patients do not have to wait longer than usual when the clinic gets busy.





The team at National
Dental Centre Singapore:
(from left) Nurse
Manager Chow Paik
Choo & Senior Staff
Nurse Serene Tan.

Putting tech to work

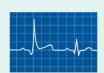
Technology has brought significant improvements to clinical workflow and care coordination in SingHealth institutions, allowing nurses now to spend more time on patient care.

NO MORE MANUAL CHARTS

Medical Device Interface (MDI)

This one-stop solution does away with the need for nurses to manually chart patients' vital signs and ventilator settings. The interface allows data to go directly to the Electronic Medical Records system, reducing paper records and data entry errors. This leaves nurses more time for patient care in the wards and intensive care units.









Nurse scans patient's barcoded wristband to identify and verify the correct patient Nurse takes patient's vital

signs

After vital signs are taken, nurse verifies patient's name and identification number (NRIC) against the corresponding readings



IMPROVING SAFETY AND PRODUCTIVITY

Electronic Nursing Documentation and Handover

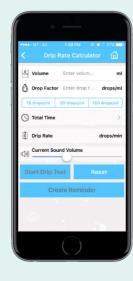
Nurses can now electronically document, track patients' conditions in real time and conduct handover to the next shift through the system. In addition, multidisciplinary team members have quicker access to secure, up-to-date patient information at every point of care, which helps them in their clinical decision-making.



A PAL TO TURN TO

Nurses' Pal App

It is a mobile app designed by SingHealth nurses for nurses. For nurses on their rounds, this is a quick and easy reference guide with information vital for diagnoses, treatment and patient education. The best part is they can use this electronic tool without leaving a patient's bedside.





KEY FEATURES

1. STEP-BY-STEP GUIDE

- Prevention and Management of Falls
- Prevention and Management of Pressure Ulcers
- Stoma Care
- Wound Care

2. DRIP RATE ONLINE CALCULATOR

Calculates the intravenous (IV) drip rate to ensure the IV fluid is given at a specific rate

3. REMINDER FUNCTION

Allows nurses to set reminders to check on patients and their vital signs when they undergo blood transfusion

Touching lives

These nurses volunteer for medical teaching missions to parts of the world that can benefit from their knowledge and skills. And they discovered that they gained as much as they gave. By Thava Rani



Ms Minnie Koh (in uniform) with her counterparts from Sri Lanka, Bhutan and China (left to right).

We learn as we teach

When she was young, Nurse Educator Minnie Koh wanted to be either a teacher or a nurse. In 2011, when she joined the SingHealth Alice Lee Institute of Advanced Nursing, she found that she could actually do both.

At home, she supervises and assesses nursing students and trainees in their clinical attachments. Her job also involves planning and conducting sessions for various programmes according to curriculum and learners' levels. She is also a basic life support coach to nurses, doctors and allied health staff.

But when she volunteers for overseas missions, that is when her teaching career really takes off.

"I want to thank my supervisors for the opportunities they've given me and others to teach nurses regionally and internationally. These trips allow me to experience nursing in other countries and exchange practices with my counterparts there," said Ms Koh, 35, a mother of two preschoolers.

However, these trips are not easy. "In our exchange programmes in China, we have to teach in Mandarin. I can manage normal conversations, but medical terms are challenging. So I'm usually up late at night practising for the next day's session," she said.

Her most recent trip was to China's Sichuan province, where she was in a team which trained about 600 nurses and nursing leaders. The trip was a collaboration with West China Hospital and supported by Temasek Foundation International.

"On these trips, we have to think on our feet, because concepts and cultures vary, and we can only gauge at what



THESE TRIPS ALLOW ME TO EXCHANGE PRACTICES WITH MY COUNTERPARTS THERE.

MS MINNIE KOH, NURSE EDUCATOR, SINGHEALTH ALICE LEE INSTITUTE OF ADVANCED NURSING

level to pitch our teaching when we are there," she said.

She also often acts as a preceptor when nurses in those countries implement quality improvement projects in their hospitals, based on what they have learnt. This means that she has to make follow-up trips to those countries.

Although these are teaching trips, Ms Koh said she learns much from those she teaches.

"I used to think we need advanced technology to achieve better nursing care, but I've come to realise that you can improvise and improve using existing resources."

For instance, in China, she saw nurses using torches, placed outside patients' rooms, to indicate whether a nurse was already attending to a patient – an innovative adaptation of the call system of local nurses.

"We learn as we teach. It's always a two-way process."

Language never a barrier

How do you teach when you cannot speak the language? Nurse Clinician Maliga Riaki Chinniah has never found that an obstacle.

She has taught nurses in India, Vietnam, Papua New Guinea and Sri Lanka, and in most of these places, she could not speak the local language.

But this veteran nurse with more than 30 years' experience in the Cardiothoracic Intensive Care Unit at the National Heart Centre Singapore (NHCS) has always provided excellent care, regardless of language.

In 2005, she was in Delhi on a threemonth trip to set up an intensive care unit in a new private hospital. Her role was to train nurses to provide care to cardiothoracic patients and develop policies and procedures for their cardiothoracic unit.

Despite the language barrier, she managed to conduct on-the-job training supported by formal classroom lessons, and covered topics such as pre/post-operative care and handling of ICU equipment with the help of English-speaking nurse educators.

In 2008 and 2010, she faced a similar language issue in Hanoi, Vietnam. There, she trained nurses in delivering post-operative care, working through local doctors who doubled up as interpreters.

Her trips have left her with the feeling that she has learnt as much as she has taught.

In Hanoi she was impressed with their resourcefulness. "I admire their





NOTWITHSTANDING LANGUAGE BARRIERS, THEY WERE EAGER TO LEARN AND APPRECIATIVE OF OUR SHARING.

MS MALIGA RIAKI CHINNIAH, NURSE CLINICIAN, NHCS

creativity. They have limited resources but often improvise by re-using disposable items. It makes me thankful for the resources we have here when caring for our patients."

She was also impressed by their enthusiasm for learning. "Notwithstanding language barriers, they were eager to learn and appreciative of our sharing. Seeing them practise what they were taught, I felt happy to have contributed in some way to better health care in their communities."



across the globe



Ms Chua Soh Cheng (extreme left) with her colleagues on a humanitarian mission trip to Myanmar.

Saving the poor from blindness

In some remote parts of the world, people with cataracts have no access to cataract surgery. Even if medical teams get there, sterilising operating equipment is a challenge.

This is what Ms Chua Soh Cheng, Senior Enrolled Nurse, Singapore National Eye Centre (SNEC), has encountered on her multiple missions overseas. These missions, organised by SingHealth, the Singapore Society of Ophthalmology, or private charity groups, focus on cataract surgeries.

"These places have no access to medical care, so it's really fulfilling to be able to reach out to them," said Ms Chua, 51.

There, her duties include clinical work, logistics and coordination. She ushers patients to the surgery room, sterilises instruments, and helps whenever she is needed. Over the years, she has come to appreciate how crucial every role is.

"I'm not a doctor or a scrub nurse so I can't help with the actual surgeries. But there're so many other ways to contribute. Every role is equally important for a successful mission. Even the man who helps us carry the heavy equipment makes a difference," she said.

The surgeries are not always conducted in hospitals; sometimes they are done in makeshift theatres the team sets up in schools, cleaning and improvising with whatever is available on site. Once, in Sikkim, she even had to clear away a beehive, and in Cambodia she had to use an open fire outdoors to sterilise surgical equipment.

"The temperature by the fire was so incredibly hot, I felt I was boiling along with the equipment," she laughs, remembering.



THESE PLACES HAVE NO ACCESS TO MEDICAL CARE, SO IT'S REALLY FULFILLING TO BE ABLE TO REACH OUT TO THEM.

MS CHUA SOH CHENG, SENIOR ENROLLED NURSE, SNEC

But she takes it all in her stride, often even adding her personal touch to these memorable experiences.

For instance, on her first medical mission to Batam more than a decade ago, she sought, and brought along, gifts such as pens from family and friends for the patients there.

"After that, I realised that what they really needed were sunglasses to reduce the glare after surgery. So, for the next trip I approached more people and got colleagues involved too. Eventually, I found a vendor who could supply sunglasses at a very low price," she said.

Since then, she always finds out what the locals really need and brings it along on successive trips.

"I've seen how the team's contributions can really change people's lives," she said. "My life, too, has been enriched, and it motivates me to do even more."

Lending a hand wherever it's needed

If you think a full-time nurse with four children hardly has time for herself, much less volunteer, think again!

Nurse Clinician Murniyati Rapsen, Sengkang Health (SKH), makes time for volunteering by carefully juggling her work and family commitments.

Ms Murniyati, 42, first volunteered at a community centre health screening eight years ago. She thought she would "just give it a try".

"I met people from different walks of life and gained experience outside of the hospital environment. I really enjoyed it and was hooked after that," she said.

Since then, she has taken on other projects and used her skills to help communities both locally and overseas.

In 2015, she went to Saudi Arabia as part of a team assembled by the Islamic Religious Council of Singapore for a Haj mission. Their job was to look after the health needs of more than 700 Singaporean Muslim pilgrims for six weeks.

"The trip was quite eventful. A crane collapsed and there was a stampede, so we were kept on our toes nursing the injured," she recalled.

Extending a helping hand comes naturally to Ms Murniyati, who also volunteers with several medical teams for events such as the Standard Chartered Marathon, the SEA Games and the Paralympic Games, as well as community health screenings organised by community centres.

Closer to home, her nursing skills came in handy when a neighbour collapsed in his home a week after she returned from her Haj mission.

"His helper came asking for help



WHEN I HELP OTHERS, I FEEL GOOD FOR HAVING MADE A DIFFERENCE IN THEIR LIVES.

MS MURNIYATI RAPSEN, NURSE CLINICIAN, SKH

and when I walked in, I saw him lying on the floor, looking pale and soaked in perspiration. He was showing signs of having had a heart attack, so I asked his wife to call for an ambulance. I had my medical equipment from the Haj mission with me and was able to run simple tests like an electrocardiogram and blood glucose test. I kept reassuring his family while continuing to monitor him."

After the paramedics took over, Ms Murniyati drove the family to the hospital and helped them with the admission process. "I'm glad I was there to render early emergency care."

Explaining why she intends to continue volunteering and serving the community for as long as she can, she said, "When I help others, I feel good for having made a difference in their lives."



Ms Murniyati (far right) with fellow medical volunteers at the Standard Chartered Marathon.

ROFILE PHOTOS: VERNON WONG / DARREN CHANG



FUTURE OF NURSING

Transforming the Nursing Workforce

CARE

More time for patient care



THROUGH **TECHNOLOGY**



JOB RE-DESIGN



COMMUNITY

Stronger focus on community nursing



SCOPE

- Ensure integrated care delivery across the continuum
- Work closely with community care partners
- Pilot community nursing teams
- Promote preventive health care

TRAINING

- New competency framework for community nursing
- New community nursing scholarship
- Nurture new breed of nursing leaders with acute and community care sector experience

COMPETENCY

Wider training and upgrading opportunities



FOCUS

- Broad based skills to practise across care settings
- Better support for continuous upgrading



Accelerated diploma upgrading course for Enrolled Nurses



Advanced Diploma courses with more flexible, modularised ways of learning for Registered Nurses

WHAT THE FUTURE HOLDS FOR NURSES



New career opportunities in acute and community care sectors



More meaningful and dynamic careers



More time dedicated to direct patient care across the continuum



DO YOU HAVE IT IN YOU?

A rewarding career like nursing takes a certain personality type. Find out if you are suited to the role.

When outcomes are uncertain, you usually...

- A. Keep a positive outlook.
- B. Stay neutral.
- C. Visualise the worst-case scenario.

2 When you have a new task, which statement describes you the best?

- A. I like to get into it and get hands-on.
- B. I am detail-oriented and methodical.
- C. I would rather observe others.

3 Do you like working with older generations?

- A. Yes, I enjoy interacting with older people.
- B. Yes, I can learn from them.
- C. No, I find it hard to relate to them.

You are faced with an emergency and have to make quick decisions.

- A. I work well under pressure.
- B. Tranquil settings help me think more clearly.
- C. I cannot think quickly on my feet.

When something doesn't go as planned, what will you do?

- A. I will face it head-on.
- B. I will try to adapt to the new situation.
- C. I don't deal well with changes.

HOW DID YOU FARE?

- If you answered A to most of the questions, nursing may just be the perfect career for you!
- If you answered B for more than 3 questions, nursing may not be the career for you but you can consider a career in healthcare.
- If you answered mostly Cs, a career in nursing may not be the best job fit for you.