MY JOURNEY INTO DIGITAL HEALTH



SELINA LEE

As a Biochemist, I never imagined that I would work for a Global IT company, let alone being an active voice in pushing for Digital Transformation in Healthcare!

When I joined the NHS as a Medical Laboratory Assistant, my ambition was to become a Clinical Biochemist. I later moved roles to be a Clinical Trials Assistant in Children's Cancer Research, while applying for the STP Masters. In both these roles, the processes were very manual and inefficient, despite being critical steps of patient care pathways. Bloods were processed by analysers yet being matched manually by people in reception to patient cards. Cancer patients were given the latest treatments to fight cancer, yet the capturing, processing and storage of data was by majority, paper-based; increasing opportunity for mis-placed records, delays in reporting or human-error. I found it tough working in this environment, but this was definitely not unique to my Trust. So, I started questioning... Why were blood results shared via fax, not email? Why were charts hand-drawn, not generated? Why could hospitals not share patient information?

Through research, I started learning more about the role of technology within healthcare and science. From ingesting and analysing vast quantities of data, to finding new potential drug target molecules. Technology was an enabler. If clinicians had access to the right data and systems at the right time, they could focus their energy on patients and saving lives. For researchers, identifying new compounds could help accelerate innovation and drug discovery!

I had a decision to make, should I leave my pursuit of a career as a Clinical Biochemist, for a career in Health Tech, something I had little knowledge of? Plus, the field of science moves so quickly, it would be hard to return if I changed my mind. Ultimately, I made the decision based on two things:

- 1. I believed giving more clinicians and researchers, individuals far smarter than myself, access to the right technologies would have a greater impact for public health.
- 2. If I didn't try, I would NEVER know if I was capable of helping others in this capacity.

So, despite my fears, I made the jump! Now, I'm a Healthcare Client Executive for IBM, speaking to key decision makers in the NHS to help bring technologies that will make a difference to delivery of care and patient outcomes. Reflecting, I wish I had known that Digital Health was an option within the NHS, that I had encouragement to pursue this career and knowledge of opportunities. However, I have no regrets in my decision. I've learnt a lot and I have met some fantastic mentors along the way. I hope that I can now bring a more rounded approach to challenges the NHS faces, by looking at problems at Trust-wide and System-wide levels. I believe a balance of working with NHS colleagues and with innovators from the industry, the NHS can better serve the UK population!

Controversially, I never saw my own ethnic appearance as holding me back in my ability to achieve in the workplace and I may not have the same unconscious biases against me because I have an English accent. However, I think it was my ingrained cultural differences and thought processes that added to my insecurities and feelings of being an imposter, both which could have halted my career growth. Although I'm usually judged by merit not by appearance, sometimes I feel it's harder to connect with people because my experiences and interests are not of the norm in the UK. However, I've accepted that I AM different and that I should embrace it personally AND professionally. My mind works differently, I speak multiple languages and I understand two completely different cultures. Since recognising this, I have found that many SE Asian friends in the UK feel the same way too.

I was really excited when I found out the Shuri Network had been established and even more so, when I met Dr. Shera Chok. When we first met, we established that there were only a handful of female BAME leaders in Digital Health who were of SE Asian descent. Shera, breaking another norm by co-founding this Network has inspired me and fuelled my need to become more active and engaged in this area.

I want to point out to all members of the Network, that we should celebrate our differences and that we are made up of more than the four letters B.A.M.E. We should encourage each other to grow and should seek to push our own boundaries. At each pivotal point in my career, I have been anxious about making the leap. But each time, I reminded myself of my ambition. The only way to help push for change in healthcare is to speak to the visionaries and change agents. To speak their language and enact change, I must push to become one myself.







