Committing to a Purpose

Larger Than Ourselves

Text by Dr Daniel Lee Hsien Chieh

Dear friends and colleagues,

When we first took the Hippocratic Oath, we stepped into a profession that is deeply personal and profoundly social. Amid our busyness today, we sometimes forget that the ecosystem in which we practise – comprising an intricate balance of regulatory, societal and commercial milieux – is not maintained on autopilot. It requires a collective voice, a shared shield and a concerted vision to move in a direction that improves the practice environment for the true benefit of our patients. In this column, I want to speak directly to why SMA membership should be more than an optional line item on your annual checklist – a bedrock that fuels our professional sustenance.

The soul of our fraternity

Formed in 1959 and founded on the principles of service, integrity and fellowship, SMA is a non-governmental organisation and stands as the largest professional body representing doctors in Singapore. Our mission is to promote the medical and allied sciences, to safeguard the honour and interests of the medical profession, and to serve as a bridge between doctors, patients and the state. SMA advocates for the profession's interests, publishes the peer-reviewed *Singapore Medical Journal* and manages the dedicated SMA Centre for Medical Ethics and Professionalism (SMA CMEP).

We do not just speak for one segment of medicine. We are an inclusive home for the entire fraternity – across sectors, both public and private; across specialisations, representing both specialists and non-specialists; across generations, amplifying the voices of our most junior doctors to the most senior in the profession. Based on latest statistics, SMA has over 14,000 Members. When SMA speaks, it is with the mandate of the majority of the entire medical profession in Singapore.

The power of collective strength

SMA is not a trade union. However, there are times when SMA fulfils union-like functions by stepping into spaces where an individual doctor, acting alone, simply cannot effect systemic change. In an asymmetrical negotiation with institutional systems, regulatory shifts or commercial forces, a lone practitioner can sometimes be vulnerable. What may be impossible for one doctor could be achievable through the solidarity of a credible voice. Examples where SMA can provide collective strength and wisdom include, but are not limited to, the following:

(a) **Advocacy and negotiation:** SMA represents Members in national workgroups and advises on national healthcare policies, including consultations with governmental and statutory bodies. SMA is represented in the Singapore Medical Council and the Ministry of Health's (MOH) Multilateral Healthcare Insurance Committee.

(b) **Doctors-in-Training (DIT):** The SMA DIT Committee is dedicated to representing and advocating for junior doctors, addressing their working conditions, appropriate training and psychological wellbeing.

(c) **Professional support:** SMA protects Members' professional interests and provides resources concerning medical ethics and professional indemnity coverage.

Beyond tangibles: the ideological value

It is common for some to view professional membership through the lens of a tangible "return on investment" of the annual fee. SMA Members do enjoy practical benefits such as access to Member events, educational seminars and platforms for continuing medical education (CME) points, operational discounts and lifestyle perks. Yet it is crucial we do not miss the importance of membership in fostering community, shaping policies and mentoring future generations. This issue celebrates the 60th anniversary of the newsletter. Let me take this opportunity to remember and honour some notable work done by the SMA Council and Members who stepped up to fight battles on all our behalf. Much of this work went on quietly, year after year, behind closed doors, and it is timely to bring these to light.

Fair compensation for junior doctors

In the 1990s, the SMA Medical Officer (MO) Committee actively lobbied for call allowances for junior doctors. Because of that historical intervention, house officers were paid for overnight calls for the first time in Singapore's history and MOs managed to secure better call allowance structures henceforth.

Anchoring medical ethics – SMA CMEP

21 years ago, under the leadership of the late A/Prof Cheong Pak Yean and Prof Goh Lee Gan, SMA CMEP was established to teach medical ethics and champion ethical thinking. This institution has been an anchor for medical ethics education, preparing generations of doctors since 2006 to lead clinical teams

with independent medical and ethical decision-making skills through the Advanced Specialist Training Ethics course. SMA CMEP also offers modules in medical ethics and professionalism, enabling doctors to meet mandatory medical ethics CME regulatory requirements.

SMA Charity Fund

The SMA Charity Fund (SMACF) was established in 2013 to support and raise funds for needy medical students. Initiated during Dr Wong Chiang Yin's term as SMA President, it is an independent charity arm and Institution of a Public Character which ensures that no student is denied the chance to become a medical practitioner purely due to financial hardship. SMACF endeavours to develop a compassionate medical profession that contributes towards better healthcare in Singapore.

Standing tall during the SARS crisis and COVID-19 pandemic

When the SARS outbreak struck in 2003, the private sector was acutely vulnerable. At the onset, there was no national stockpile of personal protective equipment or N95 masks and none were available for sale. SMA worked closely with Singapore Health Services to secure and distribute N95 masks to private practitioners. Simultaneously, we established a relief fund to financially assist doctors and clinics that suffered devastating losses during the outbreak.

During the epidemic phase of the COVID-19 pandemic, SMA helped distribute free hand sanitisers provided by Temasek Foundation as well as batches of N95 and surgical masks from MOH stockpiles.

Elevating healthcare standards

SMA developed and pioneered the Clinic Assistant Course to formalise training for frontline healthcare clinic staff. Driven by the foresight of leaders like A/Prof Cheong Pak Yean and Dr Tan Kok Soo, this curriculum was eventually recognised, formalised and taken over by the Institute of Technical Education.

Guidelines on Fees

When MediSave usage was expanded to private hospital use, MOH requested for SMA to develop the Guidelines on Fees (GOF) as a reference framework. From 1987 to 2007, the GOF served as a vital anchor, keeping medical prices in check and protecting patients from asymmetric pricing.

In 2007, following legal advice that the GOF could contravene Section 34 of the newly enacted Competition Act, SMA withdrew the GOF in compliance with the law and held a press conference regarding this matter, acting with transparency and accountability.

A quarter century of medical defence resilience

In 1999, when the Medical Defence Union transitioned its Singapore portfolio to the Medical Protection Society (MPS), SMA recognised that doctors needed a choice in indemnity providers. Then President Prof Goh Lee Gan took the initiative to invite Australia's United Medical Protection (UMP) to be the second provider. Unfortunately, when UMP unexpectedly went into provisional liquidation in 2002, approximately 1,800 Singapore doctors were suddenly left without malpractice cover. The SMA Council moved swiftly behind the scenes, negotiating with MPS to offer membership inclusive of "nose cover" for affected doctors, while coordinating with NTUC Income to provide alternative medical indemnity insurance. This protective framework has been reinforced recently by the launch of the Marsh-Medefend scheme for private sector practitioners. This safety net is the result of SMA negotiating arrangements, building trust and sustaining valued global contacts for over a quarter of a century.

Beyond insurance policies, when an SMA Member faces the often long and lonely period of a regulatory disciplinary process, he/she does not walk alone. Today, any Member needing emergency advice, a second opinion on medical defence strategy or simply an empathetic colleague to walk beside him/her can always approach the SMA Council. There will always be a Council member prepared to assist.

The road ahead: a call to solidarity

Friends and colleagues, we are currently practising in one of the most volatile eras of modern medicine. We are actively navigating an evolving legal climate, complex regulatory frameworks, high health information protection and cybersecurity expectations. A delicate balance must be struck between practising professionally and ethically to safeguard patient interests amid rising practice costs and a complex health insurance setup. There is also the pervasive, systemic threat of professional burnout affecting doctors across all levels, especially our junior colleagues who need the support of mentors and role models among us.

We cannot effectively address these emerging challenges as isolated individuals in a piecemeal fashion. If we do not speak with one voice, others will write the rules of our practice for us.

I call upon each of us to rise and be counted as SMA Members. If you are a Member, do involve yourselves with our committees and interest groups. If your colleagues have not yet joined, please urge them to do so and join hands with this fraternity to help us address what a doctor cannot do alone. Let us commit to a purpose larger than ourselves – together, we will certainly be greater than the sum of what we can achieve alone. Thank you for your support. ◆

References

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