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SMA LECTURE 2013

Developing Singapore as an International Medical Centre Lecturer: Mr Ngiam Tong Dow



Ensuring Singapore's Continued Success in Healthcare

By Denise Yuen

SMA Lecture 2013

In this age of globalisation, it would be more realistic for Singapore to "aim to be a leading second-upper tier city like Zurich, Boston, Sydney, Tel Aviv and Hong Kong" and compete with her strong points accordingly, said Mr Ngiam Tong Dow at this year's SMA Lecture, Developing Singapore as an International Medical Centre, which was held on 26 October 2013 at Grand Copthorne Waterfront Hotel Singapore.

Speaking to an audience of doctors and healthcare workers (HCWs), Mr Ngiam recalled that when he was Chairman of the Economic Development Board (EDB) in the 1980s, he realised that Singapore could no longer develop as a production-based economy, which depends greatly on land, labour and capital, which it lacked. Thus, Singapore had to move towards a knowledge-based economy, and one of the promising knowledge sectors was Medicine. Mr Ngiam explained, "Traditionally, our best and brightest 18-year-olds compete their guts out for places in a medical school, so I thought Medicine was a natural for Singapore."

Mr Ngiam also identified two challenges that Singapore will face in its development as an international medical centre. Firstly, doctors would not be able to function without allied HCWs, and during his recent stay at Singapore General Hospital, he observed that many departments would have to close down without foreign manpower, which comprised a large proportion of allied HCWs there. Secondly, Mr Ngiam felt that although Singapore's polytechnics and Institutes of Technical Education offer courses in nursing, there was "no comprehensive plan to train nurses, who are the heart of patient medical care". He called upon MOH to convene a meeting of all stakeholders to plan how Singapore's healthcare ambitions could be realised. (For the full text of Mr Ngiam's lecture, please refer to page 9.)

SMA President A/Prof Chin Jing Jih, in his welcome address, noted that while Singapore is now a regional medical hub which attracts many international healthcare tourists, it continues to face both external and internal healthcare challenges. Externally, Singapore is facing competition from the healthcare services provided by

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neighbouring countries, with regard to price and quality. Internally, Singapore's population is both rapidly ageing and also has increasing aspirations, which add pressure to the healthcare system. A/Prof Chin commented that policymakers and medical practitioners are currently trying to find the "sweet spot between earning that foreign dollar and satisfying our local needs", and felt that Mr Ngiam's lecture would be able to address issues related to their goal.

Mr Ngiam's citation was delivered by Dr Charles Toh, an SMA Honorary Member and cardiologist in private practice (see page 7). The two men have been good friends for many years. Dr Toh noted that Mr Ngiam was one of the top civil servants who had been very supportive of Singapore's health services and research, and expressed pity that the latter was never appointed as Permanent Secretary in the Ministry of Health, or "he would have made tremendous contributions to the standard of healthcare in our country". Dr Toh also lauded Mr Ngiam's outspokenness: "He has never been afraid to speak his mind on issues passionate to him, even when he was in civil service, in the presence of ministers. After retirement from civil service, he continues to sit on many boards, and remains vocal in private and in public."

Mr Ngiam's career in the civil service lasted four decades (1959 - 1999). During that time, he served as Permanent Secretary in the Prime Minister's Office, and the Ministries of Finance, Trade and Industry; Communications; and National Development.

The annual SMA Lecture was instituted in 1963 and its themes are centred on medical ethics and related topics. SMA Lecturers are appointed by invitation from the SMA Council, and the lectureship is awarded in the main to eminent and distinguished persons who have made significant contributions to Medicine and the community, and who have much to teach and share with the medical profession.

Panel discussion

The lecture was followed by a panel discussion moderated by Dr Tan Wu Meng, a medical oncologist at National Cancer Centre Singapore. The panelists featured were: Mr Ngiam; Dr Lim Cheok Peng, Managing Director, IHH Healthcare; Prof Soo Khee Chee, Deputy Group Chief Executive Officer (Research & Education), SingHealth; and Dr Wong Chiang Yin, SMA Council Member. The discussion sparked off a lively exchange of views on issues related to the lecture.

Bringing up the issue of foreign HCWs, a gastroenterologist in private practice related an incident where two Filipino nurses informed him recently that









their contracts were not renewed. They were let go because their healthcare institution had to keep to a certain ratio of local to foreign workers. He felt that it was a waste as the two nurses had been performing well. He asked if there should be a different ratio of local to foreign workers in healthcare as opposed to, for example, the restaurant industry. Mr Ngiam agreed and said he felt that sometimes policies were implemented guite mechanically, and suggested that each industry should be considered based on its own merits instead.

A cardiologist in private practice spoke about training doctors. She noted that there was a continuing exodus of specialists from the public to private sectors, and also felt that the new residency system currently lacked a fellowship training programme (like the Fellowship of the Royal College of Surgeons), which was needed to produce specialists of uniform calibre throughout. She opined that greater emphasis should be placed on medical education, so that graduates of the local residency system could benchmark themselves against a standard. Dr Wong felt that she had raised valid points, but acknowledged that the way forward in medical training was still unclear. Additionally, he noted that importing foreign specialists was only a temporary measure to solve the lack of specialists in public healthcare, as some would leave for the private sector once they were fully registered a few years later, which then perpetuated the exodus.

On the subject of public and private healthcare partnerships, Mr Ngiam recalled asking a doctor who had gone into private practice if he now had greater satisfaction after leaving the public sector. The doctor replied that although he was earning more, he did not enjoy more satisfaction, as he felt that he was losing touch with all the difficult cases he used to handle. Therefore, Mr Ngiam believed that the gap between public and

private healthcare should be closed, and we should "make use of our resources as one Singapore". Dr Lim said that IHH is currently setting up a private hospital in Hong Kong with the University of Hong Kong's medical faculty. However, such public-private joint ventures do not exist in Singapore, which he felt was a great loss to Singapore as the private sector had much to offer the public sector in terms of experience, and strongly believed that a hybrid model was the way forward.

A member of the audience commented that doctors leave the public sector for private practice due to reasons other than the pay. She wondered if there was now a certain amount of competition between the various public healthcare clusters, and asked if this competition had brought any advantages to the doctors in the public sector. Prof Soo felt that competition was inevitable, but it could be healthy if they knew the standards of comparison, which could elevate the position of local Medicine. He felt that competition for the sake of competition, or competing on the basis of political rationales (as opposed to actual philosophical principles) would be more problematic.

Dr Tan concluded the broad panel discussion on the future direction of Singapore healthcare by identifying key themes, including the importance of "looking at the big picture" instead of only considering a small domain, for example, with respect to implementing policies. Drawing upon a medical metaphor, he commented that doctors, despite their specialist knowledge, should not see patients as single organs, but with a more holistic point of view. To improve healthcare in Singapore, he also suggested that doctors needed to continue having frank and candid discussions within their profession and also with decision makers. In that regard, the SMA Lecture 2013 was certainly a success. SMA