In Conversation With A/Prof Ng Wei Keong Alan
Message from President

Welcome to our 12th edition of the SMC News.

In this issue, we speak with A/Prof Ng Wei Keong Alan, a fellow Council member and a Senior Consultant and Respiratory Physician from Tan Tock Seng Hospital. Read about the person who inspired him to take up medicine, his hobbies, as well as his advice to doctors.

Also in this edition, we remind all fully registered doctors that the SMC Election is scheduled to be held in July 2019. Voters will be able to find out more about the nominees including their aspirations and proposed contributions before casting your vote.

We highlight the appointment of a Sentencing Guidelines Committee and the revision to the list of overseas medical schools eligible for registration to practise in Singapore.

I hope you will enjoy reading this edition of SMC News and find the information useful.

Professor Tan Ser Kiat
President, Singapore Medical Council

Contents

Event Highlights – SMC Physician’s Pledge Affirmation Ceremony
Speech by SMC President, Professor Tan Ser Kiat .......................... 3
Speech by Guest-of-Honour, Senior Minister of State for Health, Mr Edwin Tong .................................................. 6

Featured Article
In Conversation with A/Prof Ng Wei Keong Alan.... 11

Matters to Note
SMC Election 2019 .......................................................... 15
Revised List of Overseas Medical Schools for Registration to Practise in Singapore ......................... 16
Appointment of Sentencing Guidelines Committee .................................................. 16
Practising Certificates (PCs) Renewal ..................... 17

Disclaimer
Comments and opinions made by individuals and parties who have contributed to or interviewed by the SMC Newsletter are solely those of the authors and contributors and do not necessarily reflect the views or policies of the SMC. While every effort is made to ensure accuracy, SMC bears no responsibility or liability in any way for the content, information, photographs, illustrations and other material in this publication. All materials remain copyright of the SMC and no reproduction is permitted without written authorisation.
It gives me great pleasure to be here today to join you in taking the SMC Physician’s Pledge. On behalf of the Council, I congratulate you for reaching this important milestone in your professional life. At every Pledge ceremony we meet new colleagues and some senior ones as well. For many of you, it is also a reunion of friends, classmates and colleagues and there are not many occasions after you graduate that so many from different healthcare institutions can gather together in one place.

The Human Touch

We live in a time when perhaps we spend too much time looking at our mobile phones and personal devices than with our loved ones or family members. Perhaps it is time for us to reflect on a common feedback that many doctors do not communicate with their patients. They only look at the computer screen.

Although medical technology is immensely useful and important in helping us diagnose faster and treat our patients better, but we should never lose the human touch, viz - the eye contact, the words of advice, the explanations for treatment and words of empathy and compassion. We must communicate well and develop the core professional competency of interpersonal and communication skills. Our communications with our patients, be it language or body, must reflect our genuine care and concern for their wellbeing.

The Physician’s Pledge you are about to take was written to guide doctors in their practice. It embodies our Ethical Code and Ethical Guidelines or the ECEG for short, because as a professional, you must be governed by a common high standard code of conduct. You are here today to promise to dedicate your life to the service...
of humanity. Your journey through your training and practice as a Physician may be hard and filled with obstacles, but I am sure each and every one of you will find ultimate satisfaction in seeing your patients benefitting from your management. You must always make the health and wellbeing of your patients your first and only consideration.

"The SMC will, as it has always done, review its policies and processes to keep pace with developments."

**Respect for Colleagues**

The Pledge you are about to take says that we must pledge to respect our colleagues as professional brothers and sisters. It is important that we maintain good collegial relationships with colleagues including nurses, allied health professionals and others in the healthcare team to ensure we deliver holistic and team care.

We must treat colleagues with dignity and fairness; accord them due respect and share information as necessary for the benefit of patients. We must not discriminate unfairly and must manage and nurture colleagues whom we supervise. Good patient care is enhanced when there is mutual respect for one another’s capabilities and responsibilities for patients. We should not make inappropriate, unjustified or disrespectful comments about one another.

**Informed Consent**

One of the key issues that generated much interest recently is that of informed consent and its documentation. The SMC had noted previous complaints regarding patient consent and had devoted three pages (pages 37 to 39) on Consent in the ECEG.

An important part of patient autonomy involves ensuring that patients must understand before they give their valid consent (if they are able to do so) to any treatment or procedure prior to their undergoing such treatment. In addition, adequate and clear documentation must be made in their clinical notes to ensure that informed consent has been taken prior to the start of treatment.
Disclosure of patients’ information in various situations such as teaching, research and clinical conferences are adequately covered under the ECEG section on Confidentiality.

Council has, from time to time, communicated with you through emails, newsletters, circulars and other publications on its work and activities including disciplinary cases. I would encourage you to read these and visit our website. This should form part of your broader continuing education.

In conclusion, I have intentionally highlighted all these things to make the Pledge we take later more meaningful. I am sure all of us agree that the practice of medicine is not easy. The profession will continue to face challenges due to changing demographics and a new healthcare landscape. The SMC will, as it has always done, review its policies and processes to keep pace with developments.

On behalf of the Council, I wish that all of you will have a meaningful and fulfilling medical career which you can look back on with much satisfaction later. We look forward to having physicians with conscience and dignity, who are constantly striving to add to their medical knowledge and skill. On behalf of the Council, I would also like to thank SMS Edwin Tong for taking time off his busy schedule to be with us on this special occasion.

Thank you.
It is my pleasure to be here with you today at the Singapore Medical Council Physician’s Pledge Affirmation Ceremony. The Pledge is a solemn Oath to be taken by all doctors, including all of you seated here today, before the Singapore Medical Council to uphold ethical and professional standards throughout your professional career as a doctor.

**Equipping Our Doctors to Meet Future Healthcare Needs**

Singapore is expected to face a number of healthcare challenges in the near future. As a developed country with a population that has long life expectancy – and that is due in no small part to medical advances that we have made and the contribution and dedication of doctors in Singapore – we also have low birth rates, and a combination of those two factors means that Singapore has a rapidly ageing population, and a declining economically active population. One in four will be aged 65 and above by 2030. Singapore is also expected to face a growing chronic disease burden and an increased demand for healthcare services of higher complexity.

Our healthcare system needs to adapt to cope with the shifting healthcare landscape, and the shifting healthcare demands as well. This includes equipping our healthcare providers with the appropriate skills to support this change and also service the population that we have in Singapore.
Most of you will just be embarking on your journey as medical practitioners. You will also be adjusting to new practice environments. Allow me to take a few moments to touch on a few core issues as you step into the practice of medicine.

**High Standards of Care**

Societal expectations towards healthcare have changed. If you pick up any journal today, look at the newspapers and you will see that the doctor-patient relationship has evolved. A high standard of care is expected of everyone working in the healthcare sector, particularly of the doctors, although not only doctors.

This means keeping your medical knowledge up-to-date, translating this knowledge to actual clinical practice, and journeying with your patients, to understand their needs to best advise them of options so that they receive the best outcomes from the interventions you have recommended in consultation with them.

**Value-based Healthcare**

Yet, keeping your finger on the pulse of latest medical development and advancement, does not necessarily always mean that the latest and most expensive, and the most forward-looking treatment options should be provided without looking at the particular patient’s needs and considerations carefully. On this, I would like to emphasise the importance of providing value-based care to the patient.

It is not about pricing, or necessarily choosing the cheapest option, but rather finding the best evidence-based option that would provide the best care outcomes at the best cost.

To guide responsible utilisation of healthcare services and encourage the provision of appropriate and cost-effective care, the Agency for Care Effectiveness (ACE) was set up to evaluate the cost effectiveness of treatments based on evidence, and publish...
While doctors may train in different subspecialities, the illnesses that present in patients do not always conform to this sort of categorisation. Patients with multiple co-morbidities are now the norm, and they will require care from different healthcare professionals both within the hospitals and in the community. Care should be integrated and accessible for patients and it is your duty to be able to plan and coordinate the care of your patient with other healthcare professionals.

This requires good working relationships not just amongst yourselves as doctors, but also between yourselves as doctors with nurses, pharmacists, medical social workers, therapists and other allied healthcare professionals, and it requires a deep understanding of the healthcare ecosystem.

Teamwork

While doctors may train in different subspecialities, the illnesses that present in patients do not always conform to this sort of categorisation. Patients with multiple co-morbidities are now the norm, and they will require care from different healthcare professionals both within the hospitals and in the community. Care should be integrated and accessible for patients and it is your duty to be able to plan and coordinate the care of your patient with other healthcare professionals.

The question as to what makes for informed consent has been in the news of late, sparked off by several cases, most recently an SMC decision involving an orthopaedic doctor. There has also been some public discourse and discussion in the public domain, in the newspapers, in other medical journals.

What this tells us is that it is important to be clear on what it means to take informed consent. A patient must know what the treatment options are, and understand the benefits and material risks associated with those options. A doctor has to provide this information and, based on this, the patient decides on his or her course of treatment.

Informed Consent

Prof Tan spoke earlier about the need for informed consent. This is critical, because as you embark into practice and see patients and consider what is in their best interest, you will understand that the treatment options you suggest and the various courses of treatment available for them all must have the patient’s interest at the centre of all that you recommend. The interests of patients are paramount, and that is why we have informed consent because this can only be achieved if your patients know and understand the treatment that they are receiving.
But if we are not clear on what comprises informed consent, or become worried about what that standard might be, and as a result start to advise the patient of every little detail, big or small, relevant or irrelevant, this would lead ultimately to the practice of defensive medicine. This is neither in the interest of the doctor nor the patient. It would only increase the costs of healthcare and also compromise patient choice and safety. And that, I think we can all agree, is not what we want to see.

The Ministry of Health will therefore be undertaking a thorough review of the taking of informed consent by doctors. We will review the legal position, as well as the practical aspects of taking such consent – what it entails, the context on which it is taken, what the standards are or should be with a view to providing appropriate guidance for doctors. We intend to consult with doctors, whether in public or private practice, to understand their concerns and also canvass their views.

But let me be clear – that whatever we do, this consultation and review, and however we might decide to make or recommend changes – this is not about going soft on or compromising on patient safety. Acting in the patient’s best interests is non-negotiable in medical practice and remains a paramount consideration for all doctors and healthcare workers. What we do not want to have is the practice of defensive medicine, and, as I have explained, being clear on informed consent helps both the doctor and the patient.

We understand the need to have as broad a range of views as possible. To this end, we have met with members from the Singapore Medical Association, the Academy of Medicine and the College of Family Physicians, to outline our plans and to also work with these professional bodies to reach out to the broader medical community.

Collectively these three professional bodies represent almost all the doctors in Singapore, and we are confident that working with these bodies and the leaders in these bodies, we will be able to canvass the views of the medical community broadly and also take on their views and suggestions.

At the same time, we will also take the opportunity to review the SMC’s regulatory processes and systems. We intend to carry out a very comprehensive review of the medical regulatory landscape which is overseen by the SMC, from the filing of complaints, appeals, composition of the Complaints Committees and Disciplinary Tribunals and also the decision making processes of these bodies. This is timely, as we seek to constantly improve on the appropriate regulation of the medical profession.

The SMC and its processes must have, and must be able to maintain, the confidence and trust of medical professionals, patients and the general public. As we do the review, we will have that in mind to ensure that we maintain a strong and fair balance between what is the public interest and what the medical community comes back on.

In order to help us with the above exercise, we will be setting up a Workgroup. This Workgroup will comprise medical and legal professionals as well as laypersons from as broad a spectrum of interested stakeholders as possible to help us to review the existing position, canvass the views of the medico-legal community, identify improvements, with a view towards considering what, if any, of the changes that will need to be made. MOH will make further announcements on this at the appropriate time.
“Acting in the patient’s best interests is non-negotiable in medical practice and remains a paramount consideration for all doctors and healthcare workers.

Finally, I wish to stress that as all of these consultations and views that we seek to canvass, they can really only be as strong as the people who contribute towards it. So I would like to reach out to all of you and ask each of you to take part, support, participate and give your views to this process. That can only make the overall end product that much stronger.

Physicians, Heal Thyself

More often than not you will find work demanding. And as I conclude my speech this afternoon, I want to remind all of you that the journey starts today. I hope you do not see this as a milestone but as a stepping stone. You will find yourself juggling the different demands, all of which take up almost all of your time – juggling teaching, practice and mentoring responsibilities as well as research commitments. There is a danger of being overwhelmed, being burned out, if you don’t also take care of yourself. You know the phrase, “Physicians, heal thyself”. You do need to also look after your own physical and mental well-being as you step into a profession that is both demanding and at the same time also extremely rewarding.

Conclusion

Being a good doctor in today’s context requires having a wealth of medical knowledge and good clinical skills. You must demonstrate care and compassion for patients, effectively communicate with your patients so that they understand what is in store for them and what it is that you are recommending them; and work in a team with fellow colleagues – so having good collegiality and relationships not just with fellow doctors but with other healthcare professionals in the ecosystem is of vital importance.

Finally, each of you have to uphold high ethical and professional standards in your practice. That’s the only way we can maintain the public’s trust and confidence in the medical profession.

Once again, my warmest congratulations to each of you. It has taken some time to get here but I hope that you will see this as an achievement to serve the community in as much as it is to pursue your own personal dreams of being a medical practitioner. It is a milestone, and the journey ahead remains long, challenging, but I am sure you will find lots of meaning to it. I wish you all the best, as each of you play an important role in ensuring that we deliver the best healthcare possible to our citizens and residents in Singapore.

Thank you very much for being a part of the system.

From left: Dr Lau Hong Choon (Deputy Registrar, SMC), Dr Suraj Kumar (SMC Council Member), Prof Tan Ser Kiat (President, SMC), Adj Asst Prof Tan Tze Lee (President, CFPS), A/Prof Benjamin Ong (Registrar, SMC), SMS Edwin Tong, Adj A/Prof Raymond Chua (SMC Council Member), Dr SRE Sayampanathan (Master, AMS), Mrs Joanna Tan (Executive Secretary, SMC), Dr Wong Tien Hua (1st Vice President, SMA).
What brought you into the field of medicine?

It all dates back to my childhood days. I was fascinated with medicine when I was a student. I was very interested to know how diseases were diagnosed and how they were cured. Medicine is a meaningful career where one’s contribution could have a major impact on the lives and wellbeing of the people whom you treat.

Who or what inspired you most in your career and life?

My inspiration came from my father. He was an old school GP who ran a solo practice. He was very dedicated and committed to his work, and he worked very hard. Despite the long hours, he enjoyed the work. I saw how grateful his patients were when he helped eased their discomfort and made them better. It made me realise that medicine could be a very fulfilling career.

My father did not directly advise me to take up medicine; I was given a free rein to decide, and making the choice was not difficult. I am grateful to have been accepted to study medicine at the National University of Singapore.
How would you sum up your journey in medicine so far? If you are given a chance to choose again, would you still choose to practise medicine?

I have not regretted my decision since I started practising in 1985. I do not think I would have chosen a different path and I am very happy with the decision which I made. It may have been hard work and with some sacrifices but I count it a privilege to be able to serve and help patients.

I have learnt a lot from my patients as well. It is humbling to realise that despite the knowledge and experience, sometimes I feel quite helpless and inadequate because there is still much more that I do not know. To put everything into perspective, as long as the focus of attention is to help our patients, we will find a way somehow to help them. When my patients get better, there is a quiet feeling of joy that the intervention has made a difference. Gratitude and the acknowledgement from patients adds to the sense of fulfilment and joy in doctoring.

What do you do for leisure?

I realised over the years that it is important to keep a balanced life. While we work hard, there is a danger we burn ourselves out. So it is important to find an outlet or a hobby to relax and de-stress. For me it is gardening. I find it very therapeutic and it is a good stress reliever. Spending time with plants in the garden helps me to unwind. In a way it is similar to doctoring because you are now administering care to nurture the plants. Similarly, if you look after them well they will thrive and when they bloom and grow well it is a reflection of the effort. I enjoy growing wild orchids and ferns. I also enjoy taking walks in the parks and trails to appreciate the greenery and beauty of nature around us.
What made you decide to join the SMC?
Some of my colleagues in the hospital suggested that I stand for election and they nominated me. I had given some thought into this and felt it was important to uphold the high standards of the profession, and ensure that self-regulation remains within the profession. SMC is the organisation that ensures this. It was also a way of giving back to the profession.

Please share your experience serving as Chairman of Complaints Committees. What are the challenges and learnings?
The Complaints Committees (CC) review a wide range of complaints and allegations from patients against their doctors. We have to be fair to give both sides the opportunity to tell their side of the story, obtain the necessary information and reports in order to evaluate the cases objectively.

Personally, when I chair the CCs, I have to ensure that we have adequate information to understand the allegations made and the circumstances of the situation in order to be able to discuss the complaint objectively before arriving at a decision.

I think the main challenge for me is ensuring that the discussion is clear and has covered the allegations raised by the complainant. The eventual report and outcome letter that is prepared should capture the thoughts and views of the committee clearly on how we arrived at the decision.

If you were to give one single piece of advice to doctors, what would that be?
In the few years that I chaired CCs, what I realised is that many of the complaints arise because of lapses in communication.

I think it is important for doctors to remember that good communication is one of the key essentials of being a good doctor. The doctor-patient relationship is sacred and we should pay some attention to enhance and develop it so as to build better understanding and trust. In our busy clinical practices, whether in hospitals, GP clinics or polyclinics, the time spent with each patient can be short with little opportunity to know them better.

“Good communication is a core skill which is expected of doctors.”
Patients treasure that time with the doctor, and so it is important that we make the most of that time to engage the patient meaningfully and to ensure that their questions and issues are addressed.

Good communication is a core skill which is expected of doctors. So every encounter should be an opportunity in relationship building rather than a business or service transaction.

Patients today are more knowledgeable and have higher expectations. Many of them may have read about their symptoms and possible diagnosis based on their search online. As doctors, it is our responsibility to explain to them, and correct any misunderstanding they have of a particular condition or treatment. That is the purpose of the consultation. With the prevailing use of electronic medical records system, patient interaction had become less personal as there is a tendency to be spending more time looking at the computer monitor and typing than giving the patient the eye contact.

I would ask my students to put themselves in the patients’ position and try to imagine how they would feel if they are conversing to a person who is not looking at them and whose focus is somewhere else.

We should be going back to the basics of good communication.
SMC is scheduled to hold an election from **Tuesday, 2 July 2019 (8.00am)** to **Tuesday, 16 July 2019 (11.59pm)** to fill five (5) vacancies in the Medical Council. An election will be called by SMC if there are more nominees than vacancies available.

Please note that voting is compulsory for all **fully registered medical practitioners** resident in Singapore who have in force **a practising certificate** during the election period. A doctor who is required to vote and who fails to do so would not be able to apply for a practising certificate, unless he/she had a good reason for not voting, or pays a penalty of $500.

Voting will be done online using the Professional Registration System (PRS) via SMC website ([www.smc.gov.sg](http://www.smc.gov.sg)). Doctors must have their SingPass Username and password ready and must ensure that their SingPass 2-Step Verification (2FA) has been set up **before** the commencement of the election. Doctors must also ensure that their email address indicated in the PRS has been updated.

If an election is called, doctors who are eligible to vote will be able to view the candidates’ **Curriculum Vitae (CV)** in the PRS which will include information on why he or she is standing for election and the specific areas of Council’s work that he or she would like to contribute in, as well as their professional qualifications and appointments.

If you have any enquiries or require any assistance in voting, please email us at: **smc_elections@smc.gov.sg**
Revised List of Overseas Medical Schools for Registration to Practise in Singapore

The list of registrable basic medical qualifications under the Medical Registration Act was recently reviewed. The number of overseas medical schools for registration to practise in Singapore will be reduced from 160 to 103, with effect from 1 January 2020. The review was conducted to meet the changing healthcare needs of Singaporeans.

With the increased number of local medical graduates from the three medical schools to meet the healthcare needs of our ageing population, we are now able to moderate the number of international medical graduates.

The revised list of overseas medical schools as well as the press release can be found on the SMC’s website here.

Appointment of Sentencing Guidelines Committee

The Singapore Medical Council, in consultation with the Ministry of Health and Ministry of Law appointed a 16-member Sentencing Guidelines Committee on 1 January 2019. The Committee, chaired by Judge of Appeal Judith Prakash, would be developing a framework to guide Disciplinary Tribunals on the appropriate sanctions to be meted out to doctors who are charged and found guilty before Disciplinary Tribunals, taking into account sentencing principles.

The Committee is formed by members from the medical and legal fraternities as well as representatives from the Ministry of Health and the Ministry of Law. The Committee will take into consideration local jurisprudence on professional conduct and discipline, as well as practices and approaches in other jurisdictions in this area.

The press release and details of the Sentencing Guidelines Committee have been published on SMC’s website here.
Matters to Note

Practising Certificates Renewal

Fully and conditionally registered doctors whose Practising Certificates (PCs) are expiring on 31 December 2019, can renew their application from 2 September 2019 onwards.

PC Renewal Criteria

To renew his/her PC, the doctor must fulfil the following criteria:

- Obtained sufficient Continuing Medical Education (CME) points within the qualifying period; and
- Must not have any outstanding fine for not voting in previous SMC’s Elections (only applicable for fully registered doctors).

Example:

When a doctor’s existing two-year PC is valid from 1 January 2018 to 31 December 2019, any CME points accrued for approved CME activities during the qualifying period between 1 January 2018 and 31 December 2019 can be counted towards his/her PC renewal.

Where a doctor’s one-year PC is valid from 1 January to 31 December 2019, any CME points accrued for approved CME activities during the qualifying period between 1 January and 31 December 2019 can be counted towards his PC renewal.

How to Renew

SingPass and 2FA are required:

Doctors can log in to the Professional Registration System (PRS) in the SMC website with their SingPass and 2-Factor Authentication (2FA) to submit their application online. For more information about SingPass and 2FA, please visit the SingPass website.

Late application fee charges

A late application fee of $80 is chargeable in addition to the PC renewal fee for applications that are submitted in the month of December. Under the Medical Registration Act, doctors are required to hold a valid PC before they can practise.

Feedback

For feedback and comments, please contact us at enquiries@smc.gov.sg.

SMC Newsletter Editorial Committee

A/Prof Chew Suok Kai – Chairman
A/Prof Chen Fun Gee – Member
Dr Hee Hwan Ing – Member
Dr Lau Hong Choon – Member
Dr Tan Kok Soo - Member