



# SMC NEWSLETTER

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# President's Message



*D*ear colleagues,

The Medical Registration (Amendment) Act 2020 (MRAA) came into force on 1 July 2022. Previously, in the [15th](#) and [17th](#) editions of the SMC Newsletter, the SMC shared the key changes to the SMC's disciplinary processes under the MRAA. In this issue, we reiterate the salient facets of the MRAA, and how the changes will improve the disciplinary process, particularly in terms of providing quicker resolution of complaints and separation of the disciplinary tribunal functions from the SMC. It is noteworthy that only complaints from 1 July 2022 will come under these new processes and that complaints up to 30 June 2022 will be processed under the old Medical Registration Act. Any complaint from 1 July 2022 referred to a tribunal will now be handled by the new Disciplinary Commission under the Ministry of Health. This effectively separates the processing of complaints, investigations and referrals by the SMC from the disciplinary tribunal function which handles the formal inquiries referred by the Complaints Committees of the SMC.

Doctors facing disciplinary proceedings can now approach the three Professional Bodies, namely the Academy of Medicine Singapore (AMS), College of Family Physicians Singapore (CFPS), and Singapore Medical Association (SMA), for advice to deal with any anxieties they may have. Doctors can also seek help from the support programme jointly established by the SMA, CFPS and AMS, should they receive complaints against them, or face disciplinary proceedings.

Starting from this edition, we will have a dedicated column on a Series in Professional Ethics. The SMC will share guidance on how to deal with the intimate examination of patients. We start with the topic of "Propriety and Sexual Boundaries" where we highlight Guideline C4 of the Ethical Code and Ethical Guidelines and the corresponding section in the SMC Handbook on Medical Ethics, which sets out clear and actionable guidance on how to deal with the intimate examination of patients.

In the past weeks, there had been a surge in the number of COVID-19 infections driven by the newer BA.4 and BA.5 Omicron sub-variants. We take this opportunity to again thank fellow healthcare colleagues for your continued vigilance and care in keeping Singapore safe.

Professor Chee Yam Cheng  
President

# Commencement of the Medical Registration (Amendment) Act 2020

*I*n 2019, the Ministry of Health appointed the Workgroup to Review the Taking of Informed Consent and SMC Disciplinary Process. Key recommendations from the Workgroup were drafted in the Medical Registration (Amendment) Act 2020 (“MRAA”), which was passed by Parliament in October 2020. The MRAA came into force on 1 July 2022.

The amendments under the MRAA in relation to SMC disciplinary processes cover both structural changes, as well as improvements made to procedure. This article recaps the salient aspects of the MRAA, and highlights how these changes bring about (1) greater transparency in the disciplinary process, (2) quicker resolution of complaints, as well as (3) consistent and fair enforcement of standards.

## Greater transparency in the disciplinary process

**Independence of Disciplinary Tribunal** – Currently, disciplinary inquiries are held before the Disciplinary Tribunal (“DT”), which is appointed by the SMC. The MRAA establishes a Disciplinary Commission (“DC”) which is separate and independent of the SMC. It is the DC that appoints the Disciplinary Tribunal, according to specific criteria. The DC also oversees training and qualification of DT members. The DC will be headed by a senior doctor as its President, and will receive legal advice and secretariat support from a unit independent of the SMC.

**Transparency of appeal against Complaint Committee's decisions** – Presently, if a complaint is dismissed by the Complaints Committee ("CC"), an appeal may be made to the Minister, who may send the complaint back to the CC for further investigations. The MRAA replaces this appeal process with an application for review of a CC decision made to a Review Committee ("RC"). The RC will comprise a doctor, legal professional and layperson. The MRAA makes clear that the RC may only make an order on whether the CC has complied with the applicable legal procedure, or direct a further inquiry or rehearing where (i) the CC did not comply, or (ii) there is new evidence submitted to the RC that is material to the complaint or matter.

### **Quicker resolution of complaints**

**Introduction of time bars** – Under the present Medical Registration Act ("MRA"), there is no limitation period for lodging a complaint. The MRAA introduces a 6-year time bar to file complaints to the SMC. Complaints which are submitted more than 6 years from the date of the conduct involved, or from the earliest date the complainant had knowledge of it, will not be referred to the Chairman of the Complaints Panel ("CP"). The only exception is if the President of the DC assesses that it is in the public interest to do so.

**Faster notification of complaints to medical practitioners** – Currently, a medical practitioner is only notified of a complaint after investigations have been directed and the CC finds that the medical practitioner has a case to explain. Moving forward, medical practitioners will be notified once a complaint is made against them.

**Strict control of timelines** – There is currently no limit to the extensions of time which the various disciplinary committees can be granted to complete their inquiries. Under the MRAA, the ICs, CCs, DTs and RCs will be able to seek only one extension of time from the Chairman of the CP or the President of the DC. Subsequent extensions of time will require the SMC to apply to the High Court.

**Consistent and fair enforcement of standards**  
**Improved process for referral of matters to DT** – Under the old MRA, the CC alone decides whether to direct a formal inquiry, with no room for the SMC to disagree and without the need to draft charges. Under the MRAA, where the CC opines there is need for a formal inquiry, it recommends to the SMC that an inquiry should be held, and must formulate charges against the respondent medical practitioner. It is the SMC that then decides whether a complaint should be referred to the President of the DC for a formal DT inquiry. A case will only be referred to the DT where there is cause of sufficient gravity.

**Guarding against piecemeal submission of documents and evidence** – There has been feedback that complainants sometimes submit documents and information in a piecemeal fashion. Under the MRAA, a complainant will have to provide all relevant documents and information in their possession at the time of submitting a complaint. The same applies for the respondent medical practitioner when responding to the complaint.

In the lead-up to the MRAA taking effect, the SMC has been working closely with the MOH and other stakeholders involved to implement the necessary frameworks and processes. The SMC is confident and hopeful that the MRAA will bring about an improved regulatory system that is fair and effective.

# An overview of the Interim Orders Committee Protecting Members of the Public

## Q1. What is an Interim Order (IO)?

An IO serves to protect members of the public and the public interest prior to the conclusion of substantive disciplinary proceedings against a registered medical practitioner. An IO is distinct from the sentence that will be meted out if the registered medical practitioner is referred to a Disciplinary Tribunal (DT) and is found guilty of a disciplinary offence.

## Q2. What is an Interim Order Committee (IOC)?

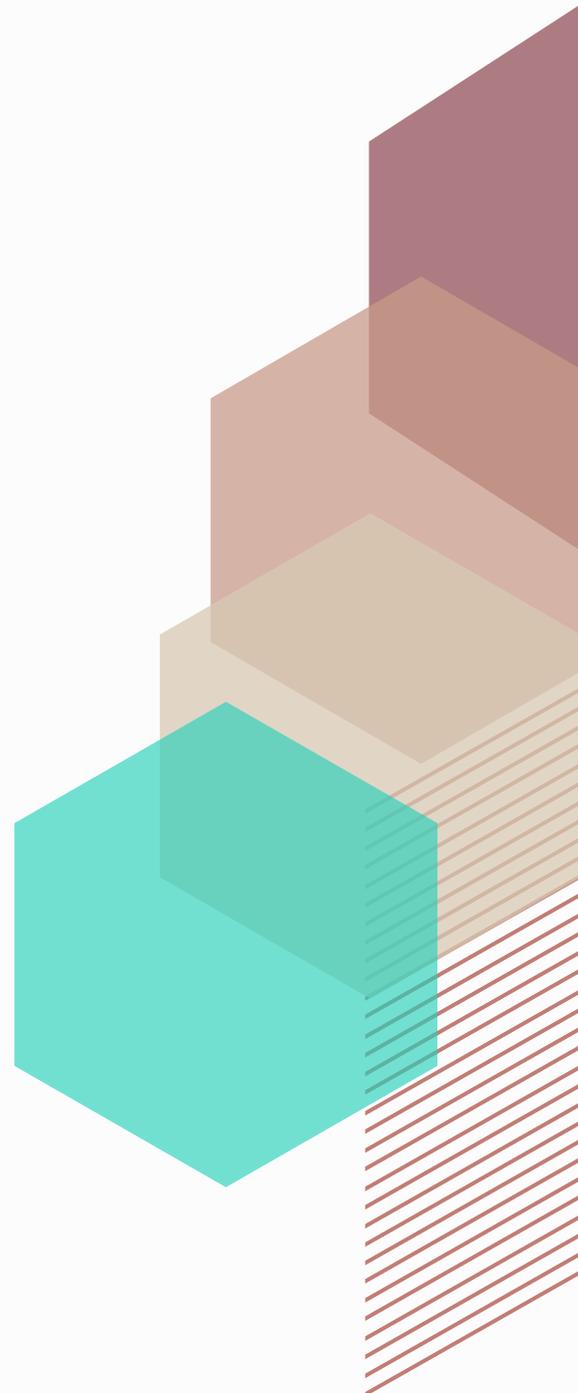
The Singapore Medical Council ("SMC") may appoint one or more committees each comprising 3 of its members to form the IOC, called for the purposes of the Medical Registration Act 1997 ("MRA"). The IOC serves to inquire into any matter referred by the SMC and may be appointed in connection with one or more matters or for a fixed period of time.

## Q3. What is the maximum term of suspension in an Interim Order?

The maximum term of suspension that an IOC can order under MRA is 18 months. However, if the disciplinary proceedings against the registered medical practitioner are still ongoing at the end of this 18 months' period, the interim suspension order may be extended until the said proceedings come to a conclusion. Registration of the medical practitioner is conditional on his compliance, during such period not exceeding 18 months as may be specified in the order, with such conditions or restrictions so specified as the IOC thinks fit to impose.

## Understanding the SMC's Disciplinary Proceedings

- SMC disciplinary proceedings are distinct from any criminal proceedings against the registered medical practitioner, which will be dealt with by the relevant enforcement agencies (e.g., the Singapore Police Force, in consultation with the Attorney-General's Chambers).
- Sentences in disciplinary proceedings are meted out by DTs which are appointed under the MRA, and not by SMC. In determining the appropriate sentence in a given case, DTs will consider the harm caused by the doctor's conduct and his culpability, with reference to the range of sentences provided for under the MRA and the orders meted out in precedent cases.
- For more information, you may wish to refer to the [“Sentencing Guidelines for Singapore Medical Council Disciplinary Tribunals”](#), which were developed in conjunction with the courts, medical professionals, and legal practitioners, for more information on sentencing in the medical disciplinary context.



# Emotional Support Programme

## Support for Doctors Facing Disciplinary Proceedings

In 2019, the Ministry of Health Workgroup to Review the Taking of Informed Consent and SMC Disciplinary Process (“**the Workgroup**”) recommended that a support scheme be developed to help doctors who are facing disciplinary inquiries to better understand the disciplinary processes and allay their anxieties.

The Academy of Medicine Singapore, the College of Family Physicians Singapore and the Singapore Medical Association (the professional bodies or “PBs”) came together to implement the support service for doctors who are facing SMC’s disciplinary processes. The support service is independent of SMC and is administered by the PBs. Doctors do not need to be a member of a PB to request the service. This service was rolled out on 1 June 2022. The announcement in the SMC website can be viewed at this [link](#).

### How the Support Programme Works

The requesting doctor will be informed by SMC when he receives the complaint about this support service. If he decides to seek help, he will be matched by the PB he contacts to a volunteer support doctor. The role of the support doctor is to provide emotional support as well as general guidance on the disciplinary process. The support doctor does not provide medical, legal or case-specific advice. The support service is strictly confidential between the support doctor and requesting doctor.

Doctors who wish to seek other types of support may wish to contact the appropriate professionals, such as psychiatrists, psychologists or counsellors, or organisations that offer such services, and are encouraged to do so for their wellbeing. For legal support they will have to seek their insurance or indemnity provider or a solicitor.

<p><b>Who we are</b></p> <p>The three medical Professional Bodies (PBs) – the Academy of Medicine, Singapore (AMS), College of Family Physicians Singapore (CFPS) and Singapore Medical Association (SMA) have come together to implement a doctor support service to provide emotional support to you and to help you manage your anxieties and fears. This is a confidential service and all that transpires is confidential between you and the supporting doctor.</p> <p>Volunteers who participate in providing this support service are fellow doctors who would be able to provide a listening ear and collegial support. They are also knowledgeable about the Singapore Medical Council’s (SMC) disciplinary system and would be able to provide appropriate support as you navigate the various stages of complaint, investigation, and outcome of the process.</p>	  	<p><b>Doctor Support Service</b></p> <p>Are you facing a complaint or disciplinary proceedings? A support service for doctors set up by AMS, CFPS and SMA can help.</p> <p>Find us at</p> <p><b>AMS</b> 6593 7870 drsupport@ams.edu.sg</p> <p><b>CFPS</b> 6223 0606 contact@cfps.org.sg</p> <p><b>SMA</b> 6223 1264 sma@sma.org.sg</p>	<p>In the course of a doctor’s practice, there are times and instances where the outcome of a treatment or a consultation may lead to complaints against the doctor. The majority of complaints do not result in formal disciplinary proceedings, with most leading to Complaints Committees issuing letters of advice. These letters serve to guide doctors on where their practice has fallen short and/or how they may improve their practice.</p> <p>However, we understand that being informed of a complaint against one’s practice can be a difficult and stressful experience. This is compounded by the fact that the disciplinary process may take some time to reach a conclusion. Some doctors may even keep this event to themselves and not confide with family, friends or colleagues about their anxieties and worries.</p>	<p><b>What support is provided?</b></p> <p>The supporting doctor from the professional bodies is an experienced member who fully understands the Singapore Medical Council’s (SMC) disciplinary process.</p> <p>Areas where the supporting doctor may advise you include:</p> <ul style="list-style-type: none"> <li>• what to expect from the disciplinary process;</li> <li>• how to deal with undue stress; and</li> <li>• guidance on access to legal advice and insurance support.</li> </ul> <p>Please note that the supporting doctor is unable to provide you with legal advice or guidance regarding your case or how you should respond to the complaint. The supporting doctor is also not authorised to speak for the SMC, or any party involved in the inquiry of your complaint. Your legal counsel is the appropriate party to advise you on these matters.</p>	<p><b>Who can use this service?</b></p> <p>All doctors who are facing a complaint can access our support service. The support is available from the time the doctor receives the notice of complaint until the final conclusion of the inquiry into the complaint.</p> <p><b>The service is confidential</b></p> <p>The professional bodies will obtain the necessary information such as names, emails, and phone numbers to facilitate communication between you and the supporting doctor. Any information shared is kept confidential between parties.</p> 
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## Series in Professional Ethics

# Propriety and Sexual Boundaries

### Ethics and the Medical Profession

A historical cornerstone of the medical profession is that the practice of medicine is, above all, a calling of the highest order.<sup>1</sup> Indeed, the Singapore Medical Council (“SMC”) Physician’s Pledge represents the medical profession’s commitment to the service of humanity, upholding the honour and noble traditions of the profession, and complying with the SMC’s Ethical Code and Ethical Guidelines (“ECEG”).<sup>2</sup>

In *Lim Mey Lee Susan v SMC*,<sup>3</sup> the High Court observed that the Physician’s Pledge is not just mere rhetoric; it shows that the spirit of public service and the existence of ethical obligations underpin the practice of medicine. As society collectively entrusts doctors with its members’ health, well-being, and lives, patients and society at large expect doctors to be responsible, and to maintain the highest standards of professional practice and conduct.<sup>4</sup>

With the exhortations above in mind, the SMC has lined up write-ups on “Series in Professional Ethics” for the SMC News, starting with the present issue. In these pieces, the SMC will highlight common ethical issues that may arise during medical practice and offer some guidance on such issues.

## Propriety and Sexual Boundaries

As part of medical practice, doctors often need to examine patients' bodies, including their intimate regions. For example, doctors frequently place their stethoscopes on patients' chests to detect pulmonary issues, or palpate patients' abdomens to identify abdominal problems. Since these regions are, or are close to intimate parts of the body, complaints by patients could arise if these examinations are perceived to be performed improperly.

The SMC wishes to take this opportunity to highlight Guideline C4 of the ECEG and the corresponding section in the SMC Handbook on Medical Ethics ("HME"), which set out clear and actionable guidance on how to deal with intimate examinations.

Apart from the self-explanatory prohibition against having an inappropriate relationship or sexual contact with a patient,<sup>5</sup> Guideline C4 of the ECEG emphasises the need for doctors to ensure that a reasonable patient would feel safe, secure and comfortable, without any misconception or fear that his/her modesty is compromised or that he/she is being taken advantage of in a sexual manner.<sup>6</sup> One way of ensuring this is involving a chaperone in the examination where a patient requests for one, or if the doctor assesses that the presence of a chaperone is necessary to set the patient at ease, or for the doctor's own protection.<sup>7</sup>

Similarly, a doctor should also set patients at ease by explaining his or her actions before and during the examination and by being alert and responding to verbal and non-verbal cues of unease.<sup>8</sup>

The SMC trusts that the above would serve as a useful reminder to all doctors on how to approach intimate examinations in accordance with the principles in the ECEG and HME. For more guidance on the issues above, please refer to [Guideline C4 of the 2016 ECEG](#) and [Section C4 of the HME](#). Doctors may also wish to refer to the United Kingdom General Medical Council's [Guidance](#) on Intimate Examinations and Chaperones for some good practices that can also be applied in the Singapore context.

<sup>1</sup> *Lim Mey Lee Susan v Singapore Medical Council* [2013] 3 SLR 900, at [39].

<sup>2</sup> Regulation 16(2) and the Second Schedule to the Medical Registration Regulations.

<sup>3</sup> *Lim Mey Lee Susan v Singapore Medical Council* [2013] 3 SLR 900, at [40].

<sup>4</sup> *Low Cze Hong v Singapore Medical Council* [2008] 3 SLR(R) 612, at [36].

<sup>5</sup> Guideline C4(1) of the ECEG; Section C4 of the HME.

<sup>6</sup> Guideline C4(3) of the ECEG.

<sup>7</sup> Guideline C4(4) of the ECEG.

<sup>8</sup> Guideline C4(2) of the ECEG



## Display of Qualifications, Titles and Designations, and Standards Required of Advertising

*T*he SMC issued a circular on 10 June 2022 on the display of qualifications, titles and designations, and the standards required of advertising information. Medical practitioners can refer to the circular and guidelines through [this link](#).

All registered medical practitioners must comply strictly with Sections 64 and 65 of the Medical Registration Act (MRA) when displaying qualifications, titles and designations.

### **Sections 64 and 65 of the Medical Registration Act**

#### **Medical practitioner to use only qualifications entered in register and approved title, etc.**

**64.** – (1) A registered medical practitioner must not –

- (a) use or exhibit or publish in any card, letter, stationery, nameplate, signboard, placard, circular, handbill or any notice displayed at the premises used by him for the practice of medicine any qualification other than the qualifications which are entered in any register kept under this Act or which has been approved by the Medical Council; or
- (b) use any title, addition or designation other than the title, addition or designation which has been approved by the Medical Council.

### False assumption of title of specialist or family physician

65. – (1) A registered medical practitioner who is not registered under section 22 as a specialist in a branch of medicine must not –

- (a) practise medicine or that branch of medicine under the style or title of a specialist in that branch of medicine, or under any name, title, addition or description implying that he is such a specialist or has any degree, qualification or experience in that branch of medicine; or
- (b) advertise or hold himself out as a specialist in that branch of medicine.

(1A) A registered medical practitioner who is not registered under section 22A as a family physician must not –

- (a) practise under any name, title, addition or description implying that he is registered under that section as a family physician or has any degree, qualification or experience that could make him eligible for such registration; or
- (b) advertise or hold himself out as being registered as a family physician.

(2) A registered medical practitioner who contravenes subsection (1) or (1A) may be subject to disciplinary proceedings under this Act.

### Display of Qualifications

Medical practitioners will only be allowed to display qualifications that are:

- a. entered under their registration details in the Register of Medical Practitioners, the Register of Specialists, or the Register of Family Physicians; **and**,
- b. additional qualifications (AQs) approved by SMC to be entered in a register.

### Standards Required of Advertising Information

The circular also drew attention to section G2 of the SMC Ethical Code and Ethical Guidelines (2016 Edition), on the standards required of advertising information for compliance. Medical practitioners are to ensure that their qualifications, titles and designations and advertising information if any, are approved or correctly displayed so that they do not mislead patients and members of the public.



# Practising Certificate Renewal 2022

## 1.

### *For Who?*

Fully and conditionally registered doctors whose **Practising Certificates (PCs)** are **expiring on 31 December 2022**, can submit their application from 2 September 2022.

## 2.

### *PC Renewal Criteria*

- Obtained **sufficient Continuing Medical Education (CME) points** within the qualifying period
- **Must not have any outstanding fine** for not voting in previous SMC's Elections (applies to doctors on full registration only)

## 3.

### *How to renew?*

Doctors need to **log into the Professional Registration System (PRS)** on the SMC website with their Singpass **at least one month** before their PC expires to apply for a renewal.

Applications submitted on and after **1 December 2022** will be considered as late applications. A late application fee of \$80 will apply.

## 4.

### *Reminder*

Doctors are reminded to log into the PRS to **update their contact details** such as **email addresses, handphone numbers and employment information** so as not to miss any important notifications from SMC.

# SMC Election 2022

## Introducing Elected Council Members

A call for nominations to fill five (5) vacancies in the Singapore Medical Council (SMC) was held from Wednesday, 6 July 2022 to Tuesday, 19 July 2022.

At the close of the nomination period on Tuesday, 19 July 2022 noon, a total of **six (6) nominations** were received. Subsequently, one of the nominees withdrew his nomination. The additional information on this can be accessed via this [link](#) from 8 - 14 August 2022.

As the final number of candidates equalled the number of vacancies for election, no election was required.

Under regulation 6(1) of the Medical Registration Regulations 2010, the following five (5) candidates are declared to be elected members of the Medical Council for a term of three (3) years with effect from **11 October 2022**.

They are:

1. Dr Chuang Wei Ping
2. Dr Ho Kok Sun
3. Dr Lee Yee Mun
4. Dr Leong Choon Kit
5. Dr Lim Ah Leng

We congratulate the elected members on their successful appointment to the Medical Council.





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**SMC Newsletter Editorial  
Committee**

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A/Prof Chen Fun Gee  
Dr Ho Kok Sun  
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