

TAKING SINGAPORE HEALTHCARE BEYOND OUR SHORES



Text by Dr Wong Tien Hua

This speech was delivered as the opening address of the SMA Lecture 2017 on Internationalising Singapore Healthcare

The annual SMA Lecture was instituted in 1963. Each year, the SMA Council invites an eminent and distinguished person to be our Lecturer – one who has made significant contributions to medicine and the community. Not all Lecturers are members of the SMA, nor are all of them medical doctors. Some of our past Lecturers include Chief Justice Sundaresh Menon, Mr Ngiam Tong Dow, Mr K Shanmugam and Prof Tommy Koh.

We are very fortunate to have Dr Loo Choon Yong as this year's Lecturer on the topic of "Internationalising Singapore Healthcare." It so happened that my first job after leaving government service was with Raffles Medical Group's (RMG) practice in Hong Kong. So, Dr Loo was my boss and mentor.

My journey in Hong Kong

My experience in Hong Kong was a very interesting journey of "internationalisation" for me. On the eve of 30 June 1997, a farewell ceremony and parade was held at Tamar, Admiralty, next to the then newly built Hong Kong Convention and Exhibition Centre. Prince Charles was present to witness the sombre parade as rain-soaked British troops marched amid a torrential downpour, to the sound of bagpipes playing "Auld Lang Syne". A few hours later, the Prince of Wales sailed off from Hong Kong's harbour, ending 156 years of British colonial rule.

It was a momentous evening and I was fortunate to witness the ceremony, albeit next door at the

Bank of America Towers overlooking the Tamar, where RMG had just bought over a very British expatriate medical practice with branches in Hong Kong Central, Repulse Bay and Clearwater Bay.

Two years later, on 31 December 1999, I was counting down to the New Year at a basement restaurant in Wan Chai amid a guarded expectancy that the Y2K bug would hit all computers when the new millennium dawned. Fortunately, no airplanes fell from the sky, the traffic lights did not malfunction, and our hospitals and emergency services continued to operate without skipping a beat. By then, RMG in Hong Kong had grown and expanded to seven clinics, including an airport clinic providing medical services at the then new Chek Lap

Kok Airport (currently known as Hong Kong International Airport). The other clinics were located at Hong Kong Central, Discovery Bay, Clearwater Bay, Cathay Pacific, Hong Kong Gold Coast and Lane Crawford.

Working for a Singaporean company in Hong Kong was a good learning experience for the whole team, which was led by Dr Yii Hee Seng at that time.

The healthcare sector in Hong Kong shared many things in common with Singapore, with both providing a high standard of medical care based on a British

system of medical training and with English as the primary language of education and administration. Hong Kong and Singapore also shared a similar legal system and a pro-business environment.

The challenges faced

However, the reality is that there were many challenges to setting up practice in a foreign country. Firstly, there were regulatory hurdles. Singapore doctors used to be automatically recognised and were able to register for a practising certificate in Hong Kong, but that avenue was closed just before the handover in 1997. Overseas doctors who wish to practise in Hong Kong now need to take a registration examination, followed by a one-year internship as a houseman in a government hospital.

There were also language and cultural differences. Although English was used widely, a doctor needed to speak a fair amount of Cantonese, especially in community practice.

An example of a subtle cultural difference showed up when we tried to use our Singapore patient registration form for the patients in Hong Kong. We received a lot of indignant reactions when patients were asked to declare their "race" – something we took for granted in multiracial Singapore.

There were, of course, differences in community health. People in Hong Kong live in highly dense living environments where infectious diseases can spread easily. You may recall the 2003 SARS outbreak that began at the Metropole Hotel in Kowloon before spreading quickly around the region. At the height of the outbreak, there was a huge cluster of 321 recorded cases of

SARS when it spread in **one** high-density apartment complex at Amoy Gardens in Hong Kong.

The draw of internationalisation

Singapore healthcare organisations that expand overseas seek business opportunities beyond our shores, which is understandably a natural and logical progression because our population size is limited and our healthcare sector is not very large. Moreover, Singapore healthcare providers face increasing internal competition as well as stiff regional competition. As the Singapore dollar gets even stronger, and as regional healthcare quality and standards improve and catch up with ours, we may no longer be as attractive a destination for healthcare tourism.

We have seen many Singapore businesses in other sectors expand overseas to market their products; with diverse brands ranging from banks to beer, from BreadTalk to Bronco Armoured Carriers. When I was in Myanmar, I was impressed that instead of the usual ubiquitous Starbucks coffee chain, I was greeted by a huge "Ya Kun Coffee & Toast" signboard right next to the main entrance of Yangon International Airport.

The question we would like to explore this afternoon is: what is it in Singapore medicine that is worth exporting? Is it our medical technology? Is it the standard of our services? Or is it the competence and expertise of our healthcare professionals?

Lessons from the airline industry

Perhaps we can look towards Singapore Airlines, our most famous international brand and a



Hours after the destruction of the Death Star...



Illustration: Dr Kevin Loy

market leader that has managed to maintain a competitive edge for many decades in the cutthroat business of air travel.

Singapore Airlines is known for its high standard of service as symbolised by the Singapore Girl. One of its key success factors that differentiates it from the other airlines is its focus on passenger experience: something that people are willing to pay a premium for. All this is backed up by its investments in product innovation (eg, advanced inflight entertainment systems), safety and equipment, and the overall culture of excellence and pride in its brand.

I think that the healthcare and the airline industries have many things in common. Like airlines, we aim to place our patients at the centre of our work. The interaction

that we have with our patients in building long-term relationships of trust has gained Singapore a reputation of excellence in medical services – one that has travelled far beyond our shores.

Medical technology, equipment and facilities can be replicated by others, often times at lower costs, but the trust and reputation of quality is perhaps the critical factor that we have for bringing Singapore medicine overseas.

Drawing on Dr Loo's local and international experiences on this subject, I am sure that his Lecture will educate and enlighten us, and also raise our understanding on the challenges of internationalising Singapore healthcare.

We look forward to Dr Loo's Lecture and a lively panel discussion thereafter. ♦

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