

SUPER CLINICS: THE WAY TO GO? — PART 1

“Hi, how are you and your shared practice with your partner?” This common greeting evoked an interesting response from my ex-classmate during a recent conversation. “Oh, thanks for asking. My practice is fine now. My partner and I have split, but we continue to practise in the same clinic.”

Germaine is a GP who was practising in a two-doctor practice in an older part of Singapore. She and a friend had bought over the clinic about a decade ago, and the clinic had been doing fine since. However, in the past few years, Germaine noticed that her partner had gone into a “hibernation” mode while she attended to most of the patients. After a few confrontations, Germaine and her partner decided to part ways, but instead of tearing down the set-up, they decided to split accounts. Now, they each own a consultation room at their two-doctor practice – an interesting development.

A similar arrangement was seen at the recent opening of the Hougang Family Medicine Clinic (FMC) @ Ci Yuan Community Club.

It gives us a glimpse of what a “super clinic”, as the Australian GPs call it, can achieve for the fraternity and the public. The FMC tries to replicate the Australian model, where each doctor employed is an individual owner of his or her practice, but everyone is supported by a common team of administrators and allied healthcare workers.

The main difference between the FMC and Germaine’s clinic is that the former started as a deliberate plan to attain the same success enjoyed by our overseas colleagues, while the latter was born out of a need for an ingenious plan to save her practice.

EVER-CHANGING HEALTHCARE LANDSCAPE

The Singapore healthcare landscape is rapidly changing. There are new schemes and policies being implemented every few months. All these are in an attempt to solve the over-burdened public institutions.

PROFILE



TEXT BY

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Dr Leong Choon Kit is a GP in the private sector. He is an advocate of the ideal doctor which is exemplified by one who is good at his clinical practice, teaching, research and leadership in the society. His idea of social leadership includes contributing back to society and lending a voice to the silent.

Disclaimer:

The above article is a reflection of the author and not as a result of owning or running any of the FMC.

**I REMAIN CONFIDENT
THAT THE SUPER
CLINIC CONCEPT IS
THE IDEAL MODEL
FOR THE FUTURE OF
PRIMARY CARE.**

In the private sector, our colleagues are also experiencing their own set of challenges. These include new policies arising from Managed Health Care companies, evolving expectations from a newer generation of Singaporeans shaped by the new policies, and ever increasing rental and drug prices, among others.

Dealing with these challenges has taken a toll on many GPs. Looking forward, the FMC or Germaine's model could well be the eventual GP model here. So, what are some of the potential benefits of this model?

ATTRACTIVENESS OF THE SUPER CLINIC

MAINTAIN DOCTORS' AUTONOMY

The super clinic concept allows doctors to retain their autonomy in their practice. They are able to see the same patients and continue their practice in a manner that they are accustomed to, such as prescribing the same medications.

BETTER PATIENT MANAGEMENT

With better administration support in place, patients can be tracked and organised according to an appointment system, which reminds them to attend reviews and go for various necessary tests.

The patient's condition can also be closely tracked and monitored by fellow medical colleagues.

OPTIMAL FINANCIAL MANAGEMENT

With a more efficient administrative system, cash flow will likely improve, too. For instance, more modes of payment can be made available to patients and outstanding payment can be better managed. Submission of claims will also be more timely and efficiently.

WELL-STOCKED DISPENSARY

A super clinic with a consolidated management and dispensary can capitalise on their economy of scale to enjoy better drug prices. Some medicines that are seldom used can be expensive to stock up, but with a consolidated practice, keeping this stock becomes possible. Ultimately, the public will enjoy a larger repertoire of treatment options.

ADOPTION OF INNOVATION

With a larger set-up, the super clinic is also more likely to adopt innovative ways of running the clinic and managing the patients. With the smart nation initiatives, these clinics may also be able to participate in some trials to enhance the quality of life among the segment of the population who are elderly but well. All these will allow the GP to truly practise family medicine from cradle

to grave, from preventive care to clinical care.

FREE UP DOCTORS' TIME

All the above improvements will also free up doctors to do things they enjoy. With extra time, GPs can choose to see more patients and earn more, or spend more time with their family, travel the world, train for their favourite sports, perhaps even win the elusive Olympic gold medal for Singapore! They can also choose to teach residents and undergraduates, embark on research that they could not previously find the time and resources to do, or maybe even pursue an altruistic dream to help the world through mission trips.

ADOPTING FOR SUCCESS

Admiring the super clinics from down under, I believe the primary care landscape can gradually evolve into something similar. I have never run an FMC before and am still waiting for the opportunity to run one. Despite my many failed attempts at bidding for an FMC, I remain confident that the super clinic concept is the ideal model for the future of primary care. In order to achieve this, the principle and philosophy behind human motivation must be considered. We shall explore some of the essential ingredients for success in the next instalment. ♦

