



Ahead of print

CLEARING THE FOG: YOUR MEDICAL INDEMNITY OPTIONS —

INTERVIEW WITH DR TEOH MING KENG, MPS

The past year has seen big changes in medical indemnity affecting many Singapore doctors. At the start of 2015, there were two main providers with distinct models of protection. The Medical Protection Society (MPS) offered “long-term” occurrence-based cover and NTUC Income offered claims-made “insurance-style” protection. In May 2015, the cover provided to all doctors employed by MOH Holdings (MOHH) was changed to a new “group-cover” arrangement coordinated by a third player, an insurance broker — Aon Risk Solutions (Aon). MPS also changed the (till then occurrence-based) cover for obstetricians to a claims-made model. These changes resulted in many doctors asking themselves whether their current cover was ideal (or sometimes, even “adequate”).

SMA and its council members thus received many queries from doctors asking how these changes would affect them and sometimes even a request to suggest “what’s best”. Clearly, no indemnity model is perfect, and they differ in their characteristics and features in such a way that individual doctors need to decide which would be the most suitable for their type of practice. In conversation with the Minister for Health, the SMA Council directly voiced concern that individual doctors might be prevented from choosing the model of protection they felt suited them best.

To help provide background and generic information to its members, SMA published an article on the ABCs of medical indemnity models in Singapore in the November issue of *SMA News* (<https://goo.gl/PvrE1J>). Both authors are council members who have read much about the topic. Even so, *SMA News* thought it would be good for readers to know what a full-time medico-legal professional had to add. Dr Benny Loo, representing doctors-in-training in the SMA Council, thus interviewed Dr Teoh Ming Keng, a vascular surgeon for many years (his last ten years of practice was in Singapore, mainly at the Singapore General Hospital [SGH]) who now works as a full-time medico-legal advisor in the MPS, based in London.

As a medico-legal advisor with knowledge about indemnity and litigation risks, were there other points the authors should have emphasised in their article on medical indemnity? Have they missed out on anything important?

The most important point is **who is the one needing protection?** Whether it is the employer or the individual who pays the membership subscription or insurance premium, it is the **doctor** who gets sued, who is complained about, or who

faces a Medical Council or criminal investigation. Therefore, decisions about the level of protection needed, the type of indemnity (occurrence-based or claims-made), whether it is capped and what other benefits are provided should be made by the doctor.

Doctors often don't think enough about the details of their professional protection and the indemnity they have access to — but these very details determine the quality and extent of support available when they need help with a complaint, regulatory hearing or claim.

What is the difference between MPS and an insurance company?

Our decades of experience mean that we have developed a real understanding of the needs of our members and the environment in which they work. We recognise that a doctor with 20 years of experience faces different challenges as those at the start of their career. Our medico-legal advisors are experienced doctors with legal training and they have access to expert panel lawyers. These lawyers are based in Singapore and have extensive experience working in the medico-legal field.

Most doctors know of MPS and our long-term commitment to Singapore. MPS was established in 1892, has been in Singapore for over 40 years and has grown to be an international organisation with over 300,000 members. We have stood by our members and weathered the good times and bad when others have not. Many of you would have been aware of commercial insurers such as United Medical Protection, which ceased business in 2002, leaving many members in Singapore without cover — and many are now members of MPS.

Doctors should also be aware of the wide range of benefits that MPS offers, beyond access to indemnity for claims. MPS can provide assistance with actions against members such as Singapore Medical Council inquiries, criminal investigations, patient complaints, hospital disciplinary hearings,

coroner's inquiries and adverse outcome reporting, alongside advice for those facing ethical and medico-legal dilemmas.

What is MPS doing to help doctors prevent claims?

It is an uncomfortable reality that many doctors are increasingly likely to face a complaint or claim during their career. Our aim is to support them with the ongoing challenges of modern practice through expert advice and education.

With more than 120 years of experience in supporting and defending medical practitioners, we have a unique insight into why things go wrong and why litigation and complaints arise.

We use this to promote risk management through our workshops, E-learning platform, publications, conferences and lectures, as well as by working together with local medical regulators and healthcare providers.

In March, we will be holding seminars covering the practical approach to consent and I hope to see as many members there as possible, where they can seek advice on any concerns or problems they have, from our medico-legal advisors and lawyers.

Wow! In your answers above, you sound very much like a person trained in “the business of protecting doctors”. Younger doctors are often interested in pursuing careers beyond “pure medical practice”. To end this interview, please tell us a bit about your background and how you ended up an expert in the medico-legal field.

I was lucky to have had a rewarding and enjoyable career as a vascular surgeon, having trained and practised in the UK, Malaysia and finally ten

years in Singapore. As a surgeon at SGH, I was always acutely aware of the stresses of avoiding and managing adverse outcomes. It therefore seemed like an excellent fit to devote one's life to helping doctors improve their professional experience, avoid medico-legal problems and improve patient safety, and to be able to do this as part of MPS, an established international membership organisation devoted to providing support, advice and education to doctors. Being a medico-legal advisor involves using my medical and surgical experience, medical networks and knowledge of healthcare systems and medical law to help medical colleagues. ♦

EDITOR'S NOTE

As there are still many junior doctors with questions about the Aon cover that the MOHH has bought for them, *SMA News* will try to include in a later issue an interview with a senior representative of Aon for further education.

PROFILE



INTERVIEW BY

DR BENNY LOO

Dr Loo is a senior resident in paediatric medicine at KK Women's and Children's Hospital. He looks forward to a morning dose of caffeine and plenty of patients' smiles every day.