



Vision

for the Year Ahead

*Extract from the President's address
at the SMA Millennium Dinner on
29 April 2000*

“What do we need to think about as a medical profession?

The health care reform into two vertical clusters is a big change. In this change, we need to pay attention to structure and integration. We also need to think of developing the health manpower. This includes not only the doctors but also the nurses and other paramedical professionals.

“One basic idea that I would like to share with you tonight is the vision of health care as a national defence line against ill-health and disability. Viewed this way, each level of the health care delivery system will have a clearer mission of what everyone should be doing.

The vision of our tertiary institutions should be to identify and find durable solutions to the major problems that inflict us in the community.

“It is important that our health care administrators share this mindset too. Medical care is not about just market share or about serving those who can afford specialist fees where their care would be more appropriately treated as stepped down care.

“It is about developing a sustainable health care delivery system that is able to respond to the needs, not wants, of every citizen in the country. America can boast of the best in technology but they also have substantial numbers who have no health care.

“In health care we talk of tertiary, secondary and primary levels of care. The vision of our tertiary institutions should be to identify and find durable solutions to the major problems that inflict us in the community. They must provide the leadership in updating the medical profession on evidence based best clinical practice and undertaking research that will answers to important health problems. I believe many of my colleagues are doing that. What we need is all our tertiary institutions doing that. In terms of service, they should concentrate on the complex and severe spectrum of the medical problems as our second line of defence.

“The doctors in primary care form the first line of defence. There is a need to empower them through reforms in infrastructure, funding and positive perception for them to play a more effective role. The resources spent in training doctors in the first line of defence will be translated into a health care delivery system that will be more able to deal an ageing population more effectively through health promotion, disease prevention and timely and appropriate level of care.

“Should the Government Poly-clinics be dismantled and the patients be given to the GPs, one may ask? The answer will be “no” and it will be

Above: A/Prof Goh Lee Gan delivering the President's address.

Below: Some of our VIPs and Guest-of-Honour, Mr Moses Lee.





The 41st SMA Council (From left) Dr Foo Chuan Kit, Tan Kok Joo, Wong Chiang Yin, Tan Sze Wee, Chong Yeh Woei, Yue Wai Mun, Lee Pheng Soon, Ivor Thevathasan, Cheong Pak Yean and Tan Chue Tin. (Not in photo: Dr Teoh Tiong Aun, Tham Tat Yean, Vivian Balakrishnan, Tan Yew Meng, Low Cheng Hock and Goh Lee Gan).

shortsighted to do so. However, the Government Polyclinics need to declare it has new roles as primary care plus centres and training centres for the family physicians.

“Why not? Gone are the days when the majority our people are poor and require subsidy for primary care and their role is to care for this group of people. These have dwindled in numbers and with a simple means test based on the type of housing (those staying in one or two room types), these people can be easily identified.

“Today, we have patients who desire better level of care and can afford it, certainly at the primary care plus level. The Polyclinic is able to provide this in concert with the GPs working closely together. The Polyclinic with its better infrastructure can provide the supporting role for the GPs.

“Today, we have 120 doctors who have the MMed(FM). We should make good use of their training to provide a higher level of care at the Polyclinic and ask patients to pay an appropriate fee for their services. We should make use of their expertise to provide the supporting and referral care for our GPs.

“Given this new role will also enhance the capability of the Polyclinic to be

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training centers for primary care. They should be given extra funding for the teaching role. Just as the hospitals are given training funding for HMDP, so too this should be allocated for doctors in training. This will help to develop a higher level of primary care doctors for the nation.”

TAKE HOME MESSAGES

His take home messages for the medical profession are:

- The SMA will work proactively for the profession just like it has done so in the year past.
- Members of the medical profession are reminded that together they form a national defence line against ill health and disability.
- We need to think about giving the Government Polyclinic a new role.

41st SMA Council

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