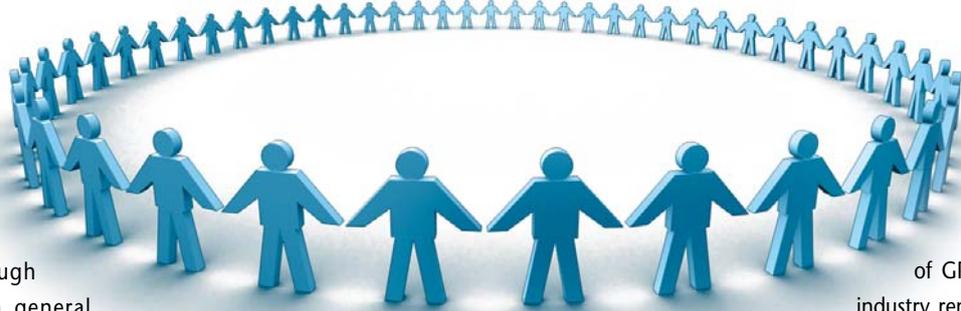


Do or Die – A Path of No Return

A medical group's experience in surviving the private GP market

By Dr Barry Thng



It is tough to be a general practitioner (GP) in Singapore.

Why is it so? Is there a way out? Before we attempt to manage the challenges, we must first identify the facts.

IDENTIFYING THE FACTS

1. Shrinking pie

The pie for GPs in Singapore is a fast shrinking one, cannibalised by hyper-competition (from traditional and non-traditional sources), narrower scope of services, eroding public's trust and diminishing values. These unhealthy trends are redefining the new role and value of GPs in the healthcare industry. If they prevail, individual GPs and the industry as a whole are at risk of being marginalised. In fact, consolidation processes within the industry have already started and will only gain momentum, resulting in more casualties.

2. Changing roles

Changes in the macro environment form a formidable force that could override efforts of individuals or groups to keep afloat. For instance, the traditional role of a family doctor caring for the entire family may no longer be relevant in our society. As families plan for the most economical use of their healthcare dollar, it is not uncommon that the grandparents, working parents and children in a family have entirely different healthcare providers. It is thus possible that even the most competent and committed family doctor could find his role and value diminishing in the changing world.

3. Disconnected

Unfortunately, the GP fraternity is too fragmented and is without a strong and pragmatic voice. On the ground, many of us are fighting for survival and are simply too pre-occupied to be concerned about the big picture. As a group, we are often perceived to be weak, inward looking and disorganised. These indifferences and insecurities are fully exploited by third parties much to our own dismay. At the same time, as a group, we do not have any concrete and systematic plans to engage the general public sufficiently. As a result of our inactions, the image

of GPs and the industry remains poor in the eyes of the general public.

Last but not least, without a united voice, we lack the confidence and authority to assert our views in the forming of policies that affect our industry. This has deprived us of the opportunity to shape our own future.

MANAGING THE CHALLENGES

Working within the constraints of the current environment, Alliance Medical Group adopted the following strategies for our survival.

1. Creating our own playing field

Our group's strategy is to focus on creating a niche of our own in the industry and within the community that we serve. We are keen to shed the image of a "cough and cold" doctor. We position ourselves to be a cheaper alternative to specialists by providing "GP-plus" services. To do so, we choose value over patient load by spending more time with each patient. In doing so, we are able to adopt a pro-active approach in managing their total healthcare needs.

Many of our doctors have also "sub-specialised" in areas such as community paediatric, community geriatric, dermatology, anti-aging and aesthetic medicines. These efforts allow us to provide value-added and value-for-money services to our patients.

2. Not another me-too clinic please!

To survive and thrive, we need to differentiate ourselves from our competitors.

Our people:

We recognise that our people are the key to success. We are indeed fortunate to have a group of dedicated doctors and staff who share the passion for excellence. Together, we brainstormed and agreed on our group's 5 core values: integrity, competency, sincerity, warm and friendly care, and efficiency. We find meaning in these values by translating them into concrete actions and apply them in every dimension of our work. Increasingly, we are seeing the positive impact of these values in shaping our group's culture.



About the author:

Dr Barry Thng (MBBS, MMed (FM), Grad Dip Derm (FP), FCFP) is Chairman of the Alliance Medical Group. He is also a trainer in the GDFM programme and part-time clinical tutor in the National University of Singapore. Barry is known for speaking his mind, perhaps a little too passionately at times. He humbly admits his views are necessarily limited by his experience and might not be an accurate assessment of the industry. However, the message to his fellow colleagues is clear: "Let us seize the opportunity to work together and shape a better future for all of us, before it is too late." Barry can be contacted at email: myfamilycck@pacific.net.sg.

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Training:

Currently, 10 out of our 13 doctors have post-graduate diplomas/degrees. It is projected that by 2007, all our doctors would have received post-basic qualifications. To encourage continued learning, we also organise our group's own CME programmes on a bi-monthly basis. At the end of these sessions, we formalise our learning points and agree on the basic standards in disease management. These standards will serve as the basis for any subsequent development of in-house clinical auditing programmes.

At the same time, we also invest in training our clinic staffs. All our full-time clinic assistants are being sent in batches for the first-aid and healthcare assistant courses organised by the Singapore Medical Association. In-house training programmes are in the pipeline to empower them with critical knowledge to serve patients better.

Service:

We define our own yardstick in service standards. Work processes are constantly fine-tuned to improve our service quality. Administratively, we provide full support to our doctors so that they can focus wholeheartedly on patient care.

3. Working with others

We continue to collaborate with like-minded doctors to grow with the group. By coming together, we are able to pool resources, leverage on economy of scales and thus reduce our operating costs.

THE GREATER GOOD

The future for all of us is both bleak and yet hopeful. There is hope if we could start working together for a healthier macro environment that encourages the practice of good family medicine. Otherwise, even if we win in the competition against our colleagues, we may be left without any trophies. ■