

The Role of Family Physicians in Singapore



OUR GUEST OF
HONOUR,
PROFESSOR TAN
CHORH CHUAN

In Singapore today, we have about 2000 family physicians providing good primary health care to Singaporeans. This large pool of talent is an important resource which we should continue to tap on and to develop.

Looking ahead, a central question is: what is the role which family physicians can play given the fast pace of change in medical practice and public expectations, and the tendency towards greater specialisation and sub-specialisation? I would like to surface a number of ideas which are not mutually exclusive, and which are centred around the concept of the family physician as a provider of holistic care. I would add that while I have selected a small number of areas to highlight, this should not in any way be taken to detract from the good work and roles which family physicians already currently play in the treatment of acute and chronic diseases.

Firstly, the family physician as a “preventor of disease”. Family physicians as a group have tremendous reach and influence on the behaviour of their patients. As many of the diseases confronting Singaporeans today are related to unhealthy lifestyles, advice and reinforcement of healthy lifestyle messages by family physicians can go a long way towards improving the health of our patients. A related issue is that of screening for common diseases. While the Ministry certainly discourages indiscriminate screening of patients, there are a small number of conditions where a regular regime of screening founded on evidence-based guidelines would be helpful. In the course of the medical consultation, the family physician may also identify patients at high risk of specific medical conditions for whom selective screening would be appropriate. To facilitate this, the Health Promotion Board is currently working with family physicians, specialists and the College to produce simple guidelines on these forms of screening which family physicians

should send their patients for, on a regular and ongoing basis.

Secondly, the family physician as an “integrator and/or partner in complex continuing care”. Many of our patients have a mix of complex medical problems which necessitate their follow-up by several different specialists in the acute hospitals. Potential fragmentation of care is a challenge that needs to be addressed in such situations. For many patients, family physicians can play an important role in helping to integrate care, in educating patients on the different drugs that they have been prescribed as well as in managing the effects of the diseases on the everyday life of the patient and his/her family. For family physicians to do this effectively, they need to be “plugged into” the care delivery system in hospitals and specialist outpatient clinics. The mechanism to do this is provided today by the various GP-partnerships and shared care programmes that both the public sector clusters and private hospitals and medical groups have established. Through these programmes, the family physician can be formally integrated as part of the total care delivery system for the patient. It is envisaged that shared treatment protocols and better communications will help enhance the care which patients will receive.

A subset of these patients who require continuing care is the group of elderly patients who have several concurrent clinical problems but whom do not require complex medical interventions. Such patients can be well-looked after by a single suitably trained family physician rather than several different specialists in acute hospitals. Such arrangements should also be cheaper and made more convenient for the patients.

Professional upgrading

The family physician is a generalist who requires breadth of knowledge and skills in order to manage the diverse clinical problems which he or she encounters. However, in order to keep up with the rapid advances in medical

practice and to play the roles which I have outlined, active participation in continuing medical education and specific training in key areas are vital requirements.

In this regard, the College of Family Physicians has been a key driver and provider. The College has been a veritable power-house in the development and conduct of high-quality training programmes and courses to meet the disparate needs of various segments of its membership. I would like to highlight some of these.

Family Practice Skills Courses

To help family physicians to hone the broad range of skills and knowledge that are important in their daily practice, the College is now introducing the Family Practice Skill Course or FPSC.

It is envisaged that the FPSC would meet the needs of three groups of family physicians:

- Those who attend certain components of the FPSC as part of the core requirements for Family Medicine CME
- Those who attend all the components of an FPSC which would qualify them for Skills Certification by the College; and
- Those enrolled in the Graduate Diploma in Family Medicine who have attended it as their mandatory elective skill course.

Home Health Care Skills Course

Family physicians are often called to attend to frail and disabled people who are home-bound. Many of these patients are elderly and their numbers are expected to rise in the future with the ageing of our population. They are also more likely to be presented with co-morbidities and complex problems. The Home Health Care Skills Course, which is being launched tonight, will equip Family Physicians with the skills required to manage such patients.

The good news is that the academic foundation component would be conducted as a Distance Learning Package. This would enable busy family physicians to study in the comforts of their homes or clinics. In addition, each distance learning package will be accredited by the Singapore Medical Council for a total of 6 CME points.

For candidates who have successfully completed the distance learning package as well as the subsequent workshop and clinical attachment in each course, a Certificate of Attendance would be awarded by the College. I am told that the Home Health Care Skills Course is only the first of such courses that the College intends to run. There are at least 8 such courses in the pipeline that would be conducted over the next 2 years. Information for these courses would be published in the Singapore Family Physician journal.

I would like to commend the College for its dynamism and commitment to continuing professional development. I would also like to extend my warmest congratulations to our first batch of 40 GDFM graduates. I would also like to congratulate the 6 family physicians who will be conferred the Member of the College of Family Physicians and the 10 who will be conferred the Fellow of the College of Family Physicians awards tonight. I wish all of you the very best in your future endeavours.
