

# Transforming Vocational Training

By A/Prof Cheong Pak Yean, President, CFPS

The primary care system in UK and Singapore have developed differently. The recent College study of the primary care system in UK provided invaluable insights as we strive to transform the Singapore system.

The College started the Graduate Diploma in Family Medicine(GDFM) four years ago in the hope that it be made the minimum standard of vocational training for family practice. During the UK visit, we learnt that it is mandatory for many years for doctors doing general practice there to undergo one year of compulsory supervised training and pass the summative assessment in general practice. This has resulted in high standard of primary care in UK.

The College believes that a standard for FM vocational training based on the GDFM should be now formalized in Singapore. The standard can be gradually made mandatory for all doctors in general practice with consideration made for those already practising. Singapore can then begin to move up from the estimated percentage of 20 to 25 % vocationally trained family physicians to the majority being trained in years to come.

About two-thirds of vocationally trained doctors in UK undergo further training to pass the membership examination of the Royal College of General Practitioners (RCGP) of the United Kingdom. The Censor Board of our College has developed a

programme leading to the Collegiate membership of the College (MCFP) by assessment.

This programme incorporating what we observed as strength in the UK system (viz. training in consulting skills with video consultation plus quality assurance & professional development initiatives) has been approved by the College Council.(see pg 8). The first trainees for the new MCFP programme would be inducted in the FM Commencement Ceremony to be held on 26 June'04.

For those doctors with GDFM who wish to acquire higher clinical skills, they can undergo further training for the Master of Medicine in Family Medicine. They are thus clinically trained to practise to the level of consultants in community hospitals, 'stepped- down care' and in specialized primary care clinics. The requirements for Masters training are also being looked into and would be announced later.

The College is able to achieve consensus and move decisively on measures to augment FM vocational training standards as all the stakeholders of primary care participated in the UK study & the deliberations after. The College hopes that the "blue-print for bold changes in primary care" as set out by the Director of Medical Services can be implemented soon to transform service delivery in primary care and its integration with the hospital and specialist services.

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## Is it a situation of Physician heal thyself?

Family Medicine as a discipline has the hope to continue being a healthy and thriving body. Family doctors in both the private and public sectors face the realities of practice daily. In the current climate, it may be the sense of lowered esteem, underpricing, long hours for the private GP or long queues in the polyclinics. With all the external stresses, benchmarking may bring a visceral reaction to the already taxed family doctor.

However, focusing on a minimum benchmark for family physician will better define their roles and also better patient care. It will improve esteem of family physicians in the long haul and we should band together to support it.

Change being the one constant in current times, we have to embrace ourselves to meet the coming developments with a positive mindset.

Thus in the feature of this issue on "Transforming Primary Health Care" section, we report DMS's opening address(front pg), the "Scottish Experience" (pg 5) from the study trip, presentations at the Transforming Primary Health Care Seminar(pg 6) and also UK benchmarks of vocational training.

The College Mirror also reports the regular College activities, such as the happenings in the Elderly and Mental Health Special Interest Groups(SIGs) and recent organised courses. Also check out our usual features in Down Heritage Trail, Hints & Tips and Practice Corner.

As family physicians, we have to band together to heal ourselves and also look forward to support from colleagues and policy makers for a conducive healing environment.

**Dr Ong Jin Ee**  
Editor of The College Mirror