Inauguration of College Programme for MMed(FM) & Collegiate Membership

by Dr Lim Lee Kiang Julian, FCFP(S)

Editor's note. Speech given at the College Convocation on 28 November 2015 on the inauguration of College Programme for MMed(FM) and Collegiate membership. This programme had its beginning in 1995 to provide the training for doctors completing the MMed(FM) programme. It was named the PPS programme – the Private Practitioners' Stream and ran as a joint effort of the School of Postgraduate Medical Studies (the old name of the present Division of Graduate Medical Studies) and the Graduate Family Medicine Centre hosted by Prof Cheong and the Department of COFM. The programme was subsequently renamed Programme B in 2006 to differentiate it from the MOH MMed FM Programme which was called Programme A. As of 2011, Programme A became the Family Medicine Residency Programme. As of 2016, Programme B will be renamed the College MMed Family Medicine Programme. The PPS and its successor, Programme B had the heritage of three articles - the spade, the rake, and the spike - to symbolize the motto of the MMed training. A symbolic handover of these three tools to the College took place at the Convocation. Dr Julian delivered the speech to mark the occasion.

PPS & MMed(FM)
Programme B Motto

In case you are wondering what this is all about – it is about the handing over of the 3 articles that was first presented on the official opening of the Graduate Family Medicine Centre located above the Cheong Medical Centre on 9 Oct 1998 by Dr Alfred Loh, then President of the College of Family Physicians Singapore. Photograph I shows that occasion, with Dr Julian Lim holding the three articles (circled) and the 3 rectangles above the notice board in the picture are 3 posters bearing the "motto" – Cover Potholes Always, Consolidate Plateaus Often, Conquer Peaks Sometimes.

"The spade to cover the potholes of knowledge along the paths we walk everyday; the rake to consolidate the plateaus of skills to better manage the difficult problems we often face; and like mountain climbers who plant flags, we would plant the spike like satisfied gardeners whenever a peak is conquered. They are there. It is up to us to find them."

Genesis of These Three Tools

Now for a bit of the genesis of these three tools. Prof Cheong likes to recount the journey as the "The Long March towards FM Recognition". The College of GP Singapore

was established in 1972 to spearhead the education and training of GPs which was not supported and which went against the prevailing thought at that time that only specialists require further training.

But eventually, our founding fathers were right. Through their pioneering efforts

the GP College was established and the vocational training was formalized, and subsequently recognized by the NUS when the GDFM diploma was conferred in 2002. That is the short story of the "long march" towards the GDFM.

The Graduate Family Medicine Centre was also the venue to spearhead the inauguration of the Fellowship Programme by Assessment in 1998. At that time, it was not universally supported that a finishing school programme be organised for Family Medicine just like the Exit Programme in the other specialties. Prof John Murtagh was invited to be the Guest of Honour for the opening of the Graduate Family Centre to train the FM Fellows first batch. Subsequent batches were largely trained in the College.



Photograph 1. Taken at the Inaugural Lecture in 1998

lmage courtesy of Dr Julian Lim



A closeup of the 3 articles and motto

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Photograph 2 shows the first batch of College Fellows having a session at the Graduate Family Medicine Centre above Cheong Medical Clinic. The FCFP(S) by assessment is now recognized as a criterion for fellowship of the Academy of Medicine Singapore in 2014. That is another short story of the "long march" of the FCFP(S) — and the march is still on.



Photograph 2. Fellowship class in session that trained the first batch of College Fellows by Assessment

Image courtesy of Dr Julian Lim

Now for the MMed and Collegiate story leading to the newly inaugurated the College MMed FM Programme at the 2015 Convocation. It started out as a cat rescue centre in 1993 by none other than Prof Cheong Pak Yean and Prof Goh Lee Gan

for dropped out trainees, like me, who have left service to be the sole bread winner for the family which was also fortuitously facilitated by the early release scheme offered during that time. It gave us a fighting chance to have bite at the MMed. It became the 2-year PPS – Private Practitioners' Stream for senior GPs hoping to have the same bite in 1995 – It was quite a big bite and one of the reasons for the smaller GDFM bite. Nevertheless, we managed to graduate 61

doctors from 1995 to 2006. Many of these Graduates from the PPS stream are now CEOs, CMBs, Directors of Polyclinics, Head of Departments, Residency Programme Director and Faculty, University faculty and so on.

PPS was renamed "Programme B" in 2006 as we were taking in more and more trainees from the polyclinic who were too senior to benefit from the MOH traineeship Programme A. It was effectively a 3-year course - taking into account the compulsory completion of the 2-year FMTP - Family Medicine Training Programme. During this time, Programme B was hosted by the then COFM Department when Prof Chan Nang Fong was there and in Dr Julian Lim's clinic. With the set-up of the Department of Family Medicine and Continuing Care, SGH, the Programme B tutorials were run by this Department and some at the College premises. We had trainers from the private sector, the polyclinics and even the university. In all, PPS and Programme B together graduated a quarter of all MMed(FM) holders.



With the new residency programme (no more Programme A); the new examination format and endorsement given to our trainees to take the MMed exam offered by the NUS (the successful ones are here tonight) and more poignantly, the support of MOH in the form of financial sponsorship for the trainees this year, it is a good time to hand over the programme officially to the College and to a name change – the College programme leading to the Master of Medicine in Family Medicine and Collegiate membership.

In closing, Prof Cheong wanted to remind us why it had to be cover potholes always. CME in the past had always been one of specialists covering the rarities – what we needed was knowledge to cover the whole breadth, leaving no holes uncovered, covering all the knowledge gaps that we encounter in our practice. Consolidating plateaus is why we do what we do in continually upgrading ourselves. We weren't quite sure what conquering peaks meant at that time. But now it is getting clearer – one discipline, many settings. It is in meeting

the needs of the society in areas that require us to conquer the peaks of knowledge and skills to be able to fulfill those challenging roles — be it in ambulatory care, community hospitals, rehabilitation centres, long term care in nursing homes, palliative care, home care, transitional care and even inpatient care.

■ CM

◆ The inauguration of College Programme for MMed(FM) and Collegiate Membership - (from left) A/Prof Goh Lee Gan, Dr Julian Lim and A/Prof Lee Kheng Hock.

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available to doctors. All these have contributed to the evolving landscape of General Practice in Singapore.

Disease patterns have also changed. We used to see patients with rheumatic fever causing defective heart valves, mitral stenosis, mitral and aortic incompetence, 3rd stage syphilis causing GPI, tabes dorsalis, charcot joints and molar pregnancies and choriocarcinoma. I also encountered many cases of silicosis among the granite quarry workers. We hardly hear of these conditions nowadays. Instead we have new infections like HIV, SARS, MERS

and Ebola virus. We are also encountering diseases of an aged-population, degenerative conditions like dementia, aged related macular degeneration and diseases related to atherosclerosis.

I am now semi-retired, having handed over my practice to my son but I still maintain a few morning sessions a week to see patients. I am grateful for the opportunity to have experienced general and family medical practice for the past 50 years, coinciding with SG50.

■ CM

