

This will allow more GPs to make use of the full range of clinical capabilities and assets of the healthcare clusters, thus bringing high quality community healthcare to every individual.

### Role of College

What is the role of the College in all this?

It is to raise the standard of Family Medicine to provide continuing professional education, including postgraduate training, to our practitioners; to keep family physicians up-to-date with developments in the ever-advancing field of healthcare. Also, just as importantly, to nurture the next generation of family medicine practitioners.

The College can also lead efforts to bring primary care to the fore. Partner our regional healthcare systems, shape a national healthcare system that is primary care-centric and anchors care within the community.

### Conclusion

The College has done well over the past five decades to build the foundation of Family Medicine so Singaporeans can enjoy better primary care.

I look forward to your continued leadership to strengthen the practice of primary care to better meet the needs of our population in the decades ahead.

Thank you all once again, and happy 50<sup>th</sup> anniversary!

■ CM

## WELCOME ADDRESS

*by CFPS President, Adj Assoc Prof Tan Tze Lee*

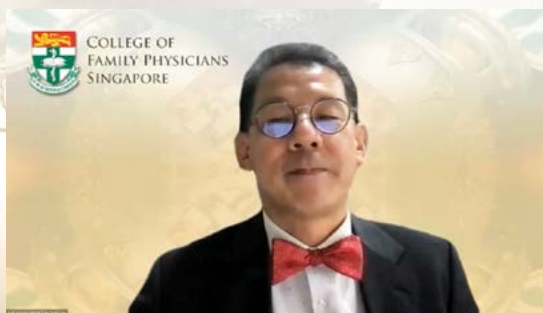
Good evening!

Prime Minister Mr Lee Hsien Loong, Minister of Manpower Dr Tan See Leng, distinguished guests and members, ladies and gentlemen,

It is my greatest honour to welcome you to our 50<sup>th</sup> anniversary celebration! We are very privileged to have PM Lee grace our event this evening, and have Minister of Manpower Dr Tan See Leng delivering the Sreenivasan Oration for 2021.

2021 has been a year that we will remember for generations to come. This is the second year of the COVID-19 pandemic, and our community has had a roller coaster ride as we continue to battle the virus. We have been blessed by a government that has helped steer the good ship Singapore through these stormy unknown seas, and as we plumb the depths of these waters, we can be confident that our leadership has always planned first and foremost with the welfare of the people in mind. We have achieved vaccination rates of more than 85 percent! If we account for children under the age of 12 who are at present ineligible for vaccination, this represents in excess of 95 percent of the eligible population! Do the people of Singapore trust the government and their doctors? Absolutely!

2021 marks the 50<sup>th</sup> year since the College was inaugurated in 1971. Fifty years is a significant achievement. A half-century, two score and ten years, golden anniversaries; such



Adj Assoc Prof Tan Tze Lee

momentous events are celebrated the world over. They mark a waypoint in an organisation's journey and give us an opportunity to reflect on the achievements of the past while looking forward to the future.

2021 is the second year of our fight against COVID-19. In the early days of the pandemic in

January 2020, the College stepped up and provided much-needed support with a hotline for our general practitioners (GPs) on the frontline. This was manned by our council members over the Chinese New Year weekend and proved to be a godsend for many of our GP colleagues who needed advice and a listening ear. The activation of Public Health Preparedness Clinics (PHPCs) was timely in getting the PHPCs the backup and equipment they needed, and the College was strongly supportive of this. The College organised a good number of town halls and webinars for our GPs who were thirsty for information regarding this new disease, as well as resilience webinars to help our colleagues weather the storms of working in pandemic times. These resilience webinars proved to be very popular and attracted both GPs and specialists alike. To this day, the College is committed to supporting our members and GPs through this crisis.

This 50<sup>th</sup> anniversary has been an opportunity to showcase what our doctors have been able to achieve over the years. Through the efforts of our council member Dr Tan Wei

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Beng, the College was able to work closely with SingPost on a series of stamps that showcase the contributions and achievements of our family doctors over the last 50 years. This series of six stamps depict our family doctors in various settings; in acute medicine, chronic disease management, community hospital care, pandemic response, medical education, and research and health promotion, and show the breadth and depth of family medicine. We are indeed very proud of these milestones and achievements and look forward to making even more contributions to the development of our healthcare services.

Just six years after Singapore was founded in 1965, the College was inaugurated on 30 June 1971. This was the culmination of the efforts of a determined group of visionary general practitioners (GPs), who foresaw the need for Singapore to better train GPs to address the healthcare needs of the nation. Looking back, the form and direction the College took was in many ways serendipitous. A chance meeting in a Sydney backyard with Dr Richard Gieves of the RACGP and Dr Wong Heck Sing resulted in a series of meetings that led to the “founding of our College.”<sup>1</sup> Our fledgling College received much advice and goodwill from the Royal Australian College of General Practitioners, and this close relationship continues to this day. These first steps eventually led to the “recognition of general practice as a separate discipline”.<sup>2</sup>

The College organised the first local postgraduate qualification in general practice, with the inaugural College Diplomate examination being held in 1972.<sup>2</sup> The external examiners were Professor Wes Fabb and Dr Richard Bank Gieves of the RACGP.<sup>1</sup> In those early days, candidates’ own preparations were their “training ground” and examination preparations were run by specialist colleagues.

In 1988, a structured vocational training for family doctors, which was a tripartite collaboration between the Ministry of Health, the College, and the National University of Singapore,<sup>3</sup> was mooted. Monthly rotations in different hospital postings for junior medical officers were introduced to train new FM trainees under the new Masters of Medicine (Family Medicine) [MMed(FM)] traineeship programme (A).<sup>3</sup> In 1995, in order to cater to the needs of doctors who were already in independent practice but were still keen to undergo training and accreditation in the MMed(FM), the

College introduced an alternative programme that became known as “Programme B”.<sup>3</sup>

The Graduate Diploma in Family Medicine (GDFM) was later introduced in 2000 to meet the needs of GPs who wished to receive training and accreditation in Family Medicine but were unable to invest the time and commitment required by the MMed(FM) programme. This course, consisting of distance learning programmes and small group tutorials, has proven to be very popular amongst practitioners.<sup>3</sup>

In that same year, the College introduced the Fellowship by assessment programme,<sup>4</sup> which is a 24-month Advanced Specialty Training (AST) programme in Family Medicine conducted by the College.<sup>5</sup> Candidates who complete the AST successfully and pass the Fellowship Summative Exit Examination are conferred the FCFP(S). The programme is offered to doctors who have successfully completed basic structured family medicine training in an approved training programme, such as the Master of Medicine (Family Medicine) [MMed(FM)] at the National University of Singapore or its equivalent.

The Fellowship programme is rigorous, and successful candidates can register their FCFP(S) with the Singapore Medical Council as a postgraduate medical degree. Fellows are recognised by the College and various institutions as having been trained to practise the medical speciality of Family Medicine at the level of a consultant family physician. Consultant family physicians are able to provide a wide range of services, such as comprehensive care, continuing care, preventive care, and personal care, as well as coordinating care needs, such as advice and referrals to tertiary centres, and liaising with other family physicians for primary care at other settings. The fellows have achieved the highest level of FM training, and with this comes great responsibility. We are grateful for our fellows who have stepped forward to be leaders in their work settings and contributed to the fraternity in the areas of training and leadership. In this way, we will be able to pay it forward for future generations.

Since 2011, when the Primary Care Masterplan was first mooted, there have been many initiatives to transform primary care in order to better right-site healthcare resources in the community, such as the Community Health Assistance Scheme (CHAS), Pioneer Generation,



Merdeka Generation, family medicine clinics, and primary care networks. These initiatives have made primary care the focus of healthcare delivery in Singapore. In each and every step, the College was consulted and involved, with family physicians instrumental in helping with the conceptualisation, setting up, and delivery of these services.

In the past five years, it became apparent that we needed to look at the health of our nation from a different perspective. Our healthcare system is highly skilled and well-trained to treat disease. We needed to go one step further and find novel ways to nip illness and disease in the bud. In 2016, the Ministry of Health adopted the 3 “Beyonds” strategy to future proof our healthcare system:

- 1) to move beyond hospital to the community;
- 2) beyond quality to value; and
- 3) beyond healthcare to health.

These goals resonate with the College, and we strive to continue training and upgrading our FPs to fulfil the nation’s health needs well into the future.

Today, family physicians play an increasingly pivotal role in our healthcare system. They are found in GP clinics across the island (over 2,000 to date), in our polyclinics, community hospitals, transitional care, intermediate and long-term care facilities, community psychiatric services, the list goes on. We serve in countless settings, but one thing that binds us is the holistic and patient-centred care that is at the core of family medicine. We develop deep and trusting relationships with patients over many years. What if they were in a position to freely choose a primary care doctor of their choice, who is able to help them to navigate their complicated healthcare journey? The late Professor Barbara Starfield of Johns Hopkins University famously said, “There are lots of evidence that a good relationship with a freely chosen primary-care doctor, is associated with better care, more appropriate care, better health, and much lower health costs.”

Family doctors do work very hard, and during this pandemic we have certainly been working much harder than during “peacetime”. What we are experiencing now is in fact a war against a virus. Some of our older patients have quipped that it feels just like how Singapore was during the Second World War!

We have to make clinical judgements that have lifesaving consequences. We are our community’s medical Sherlock Holmes, searching for the clinical truth. Our patients are now well-equipped and educated by the University of the Search Engine, and oftentimes they have already done copious research as to their symptoms. They then come for consultations to discuss the research that they have conducted. They often ask very pertinent questions and may have consulted several doctors before they arrive

in our consultation room. We may find these encounters challenging, but when done well can be very enriching to the doctor-patient relationship.

Patients seek care that is friendly, accessible, and affordable; care that is holistic; care that is able to treat the whole person in all its complexities and life experiences. They are often perplexed by the many appointments in hospitals to see various specialists. They often wish they could just see one clinician who is able to take care of all their problems. As family physicians, we are in the best position to coordinate their care and be the key person to deliver this continuity of care. We are ideally suited to be the guardian and guide of a patient’s healthcare needs: overseeing the many treatments, watching out for drug interactions and contraindications, and working out the best and most appropriate regime for them.

The College has been working hard to advocate and support family medicine for the last 50 years. One of our aims is to achieve specialist recognition of Family Medicine as a discipline. We are very glad for the strong support from the Ministry of Health for this and for the affirmation from our Permanent Secretary, Mr Chan Yeng Kit during our convocation ceremony in November. We have made much progress here and I am happy to announce that our proposal for Family Medicine Specialist recognition has been approved at the Family Physician Accreditation Board (FPAB). This has been the culmination of a massive effort by all at the FPAB, and we are especially grateful for the support and leadership of our chair, Director of Medical Services, Professor Kenneth Mak.

We are grateful to all who have contributed over the years to family medicine, and we thank all who have worked so hard to make family medicine what it is today. I am confident that being accorded this recognition will further spur the FM fraternity to continue the accelerated evolution of our primary care services.

1. College Mirror, Dec 2003 pg. 4-15.
2. <https://www.cfps.org.sg/assets/Sreenivasan-Oration/1978-Sreenivasan-Oration-Dr-Wong-Heck-Sing.pdf>
3. Wong, Teck & Koh, Gerald & Lee, Eng & Cheong, Seng & Goh, Lee Gan. (2008). Family medicine education in Singapore: A long-standing collaboration between specialists and family physicians. *Annals of the Academy of Medicine, Singapore*. 37. 132-5.
4. Thomas SL. Family medicine specialty in Singapore. *J Family Med Prim Care*. 2013 Apr;2(2):135-40. doi: 10.4103/2249-4863.117402. PMID: 24479066; PMCID: PMC3894041.
5. <https://www.cfps.org.sg/programmes/fellowship-programme-fcfps/>