

CMAAO 2019 – Singapore Medical Association

Path to Wellness

Wellness

- *"Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity."*
- <https://www.who.int/about/who-we-are/constitution>
- Many countries progressively moving away from episodic treatment of disease/illness, to a more holistic approach to health/wellness

Recent changes

- Ministry of Health (MOH) Committee of Supply 2019 initiatives
- <https://www.moh.gov.sg/cos2019>
 - Subsidised health screening for certain eligible age groups, more tests offered
 - Expansion of Primary Care Networks scheme [multi-disciplinary team of doctors, nurses and primary care coordinators for more holistic management of their chronic conditions]
 - Expansion of Community Nursing team [personalised, coordinated care to seniors with different care needs and allow them to age-in-place in the community]
 - Caregiver Support Action Plan [a) Care navigation; b) Financial support; c) Workplace support; d) Caregiver respite services; and e) Caregiver empowerment and training]

Recent changes [con't]

- Ministry of Health (MOH) Committee of Supply 2019 initiatives [con't]
 - Patient Empowerment for Self-Care Framework [empower patients with diabetes to co-own their care journey]
 - School-based HPV vaccination
 - Minimum Legal Age for the sale, purchase, use and possession of tobacco products was raised to 19 on 1 January 2019, and will be raised to 21 over the next two years. Standardised packaging with enlarged graphic health warnings for all tobacco products will also be introduced in 2020
 - Ban on Partially Hydrogenated Oils
 - Enhanced Community Mental Health Masterplan

Recent changes [con't]

- Ministry of Health (MOH) Committee of Supply 2019 initiatives [con't]
 - intake for Medicine increased significantly from more than 300 in 2010 to about 500 in 2018. The need to recruit overseas-trained locals will moderate and stabilise in the coming years
 - Recruitment of mid-career professionals to complement
 - MOH will replace the Private Hospitals and Medical Clinics Act (PHMCA) with the Healthcare Services (HCS) Bill; new licensing approach to accommodate various care models

Other developments

- Shift to encourage generalist training [as compared to specialist] to accommodate shifting population profile [aging population, chronic and multiple diseases]
- Diet
 - Healthier choice label for various food categories [e.g. brown rice, less sugar]
 - Scheme has been expanded recently to encourage at least 1 healthier choice item on food menu for participating hawker outlets [Healthier Dining Programme]
 - <https://www.hpb.gov.sg/healthy-living/food-beverage/healthier-dining-programme/about-the-healthier-dining-programme>
- Healthy living
 - National Steps Challenge [exercise bands issued free to all participants]
 - Incentives e.g. shopping/grocery vouchers for reaching certain steps targets
 - <https://www.healthhub.sg/programmes/37/nsc>
- Poverty/inequality
 - Scrutiny/spotlight on poverty recently
 - realisation that existing measures may not be adequate for widening inequality gap in Singapore
 - MOH formed a HealthySG Taskforce, initial recommendations here <https://www.moh.gov.sg/news-highlights/details/healthysg-taskforce-charts-path-to-create-a-healthier-singapore-for-all>

SMA's inputs

- SMA has been supportive of the transformation measures, e.g. MOH shift from specialist to generalist
- SMA Charity Fund [independent charity arm of SMA] has been supporting needy medical students, providing bursaries for living expenses; bursary amount has been increased to factor for inflation
- It is encouraging that Ministry of Health and Singapore Medical Council have been more consultative when deliberating on policy changes, inviting SMA for comments on potential changes

Next steps / Conclusion

- Path to wellness a long term endeavour
- Getting patient buy-in also important [e.g. personal responsibility for own health]
- Shift to holistic approach should not mean neglecting the fundamentals of medicine, i.e. autonomy, justice, beneficence, and non-maleficence
- Also, doctors can only practice holistically, if the environment and working conditions are conducive [e.g. patient waiting time, hospital bed occupancy rates, etc.]