



MINISTRY OF HEALTH
SINGAPORE

Stakeholder Consultation for Emergency Ambulance and Medical Transport Service under the Healthcare Services Act

Presented by Health Regulation Group
Ministry of Health
Updated in August 2021

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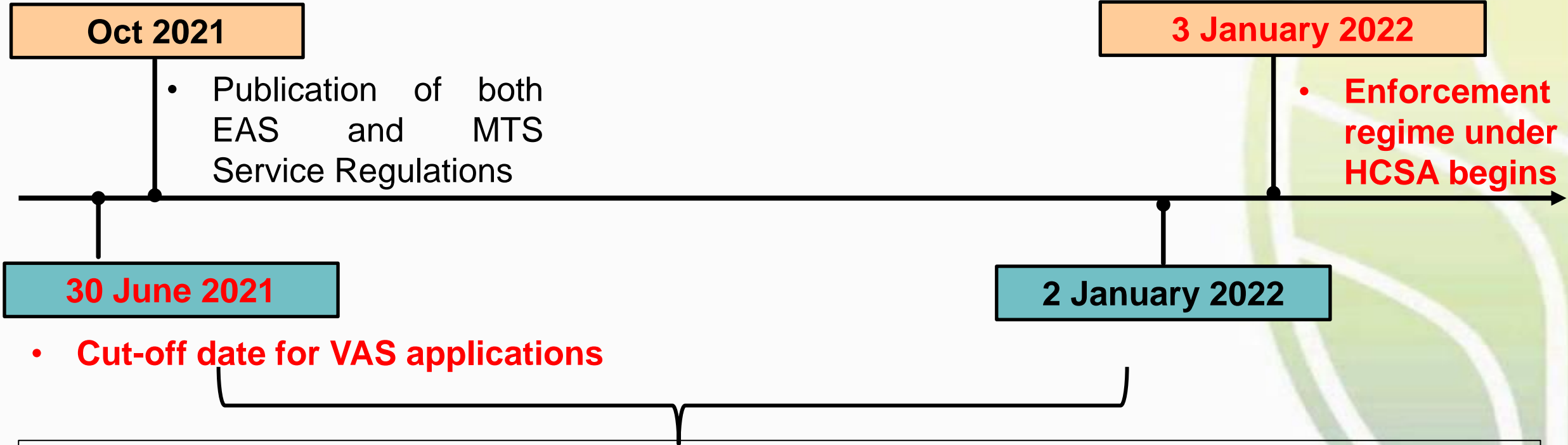
Introduction

- Under the Healthcare Services Act (HCSA), regulations are structured into **General Regulations, Advertisement Regulations** and **Service-specific Regulations**
 - **General Regulations and Advertisement Regulations:** General requirements broadly applicable to **all licensees**.
 - **Service-specific Regulations:** Unique requirements contextualised to each service or stipulates specific requirements articulated in the General Regulations.
- This presentation gives an overview of the **service requirements** that will apply to Emergency Ambulance Service (EAS) and Medical Transport Service (MTS) providers under HCSA.
 - Most of the requirements have been ported over from the 2017 Standards for EAS and the 2017 Standards for MTS. New or enhanced requirements have been marked as such.
 - More detailed technical requirements (e.g. vehicle specifications) will be stipulated in the Licensing Terms and Conditions (LTCs).

Implementation: 3-month Sunrise Period

Updated on
24 Aug 2021

During this sunrise period, PAOs should review and rectify (if necessary) their processes and practices to ensure compliance with the HCSA Regulations



- Any applications submitted from **1 July 2021 onwards** will be taken as new EAS / MTS applications under HCSA.
- Non-VAS PAOs are encouraged to inform us via eLIS (email: elis@moh.gov.sg) **by 30 Sep 2021** so that the 3 Jan 2022 cut-off may be met.
- Non-VAS PAOs that apply for a licence from **1 Oct 2021 onwards** may only have their licences issued **after** 3 Jan 2022.

Options for PAOs who do not wish to Transition to HCSA

- PAOs who do not wish to transition to HCSA will not hold a valid EAS or MTS HCSA licence and will therefore not be able to provide EAS and MTS services from 3 January 2022.
 - 1) PAOs may choose to sell off their vehicles completely to other PAOs who intend to continue operations under HCSA or amalgamate their business operations.**
 - 2) PAOs may choose to de-register their vehicles with LTA and convert their vehicles out of the ambulance scheme (can no longer be an emergency ambulance/medical transport).**
 - This is similar to the current process when PAOs sell off or scrap vehicles.
 - If the operator wishes to continue to use the vehicles, the vehicles would be subjected to vehicular taxes (e.g. COE, road tax, etc.), as with all other types of vehicles.

Overview



Overview of Service Requirements

Updated on
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Service Requirements	Summary
Governance [ENHANCED]	<ul style="list-style-type: none"> EAS + MTS licensee to appoint a suitably qualified clinical governance officer with good standing [ENHANCED] EAS + MTS licensee to appoint a service crew and ensure that they have the requisite training, competency and valid certification for provision of service in a safe and efficient manner. EAS + MTS licensee to develop written care protocols for patients transported, and a training programme to ensure the proficiency of all staff in carrying out these protocols.
Quality Assurance [EXISTING]	<ul style="list-style-type: none"> EAS + MTS licensee to maintain a framework for purposes of quality assurance and audit.
Personnel [ENHANCED]	<ul style="list-style-type: none"> EAS + MTS licensee must have a service crew comprising one crew leader who is an appropriately qualified Ambulance Paramedic, Ambulance Nurse or Ambulance Doctor. EAS/MTS licensee must ensure that there is one qualified emergency ambulance/medical transport driver. EAS + MTS licensee to ensure staffing numbers must commensurate with the number of vehicles. If the service crew comprises 3 or more staff, the additional crew member(s) should be a qualified Emergency Medical Technician (EMT), Ambulance Nurse, Paramedic and/or Ambulance Doctor. [ENHANCED] Qualification requirements for each of the service crew members will be stipulated in the Regulations.
Equipment and licensed conveyance [EXISTING]	<ul style="list-style-type: none"> EAS + MTS licensee to ensure every emergency ambulance vehicle or medical transport vehicle shall be adequately fitted and appropriate for the delivery of its licensed service (e.g. a system compatible for communication with the SCDF). The EAS vehicle or MTS vehicle must be equipped to prevent injury to crew and patients and to cope with acute patients. All equipment in each vehicle shall be functional and effective at all times when the vehicle is in operation.

Overview of Service Requirements

Updated on
24 Aug 2021

Service Requirements	Summary
Medical Management [ALL REQUIREMENTS ARE ENHANCED]	<ul style="list-style-type: none">• EAS + MTS licensee shall put in place measures to triage the patient, and to ensure appropriate management of patients, including the use of equipment and consumables where clinically justified.• EAS licensee must ensure that there are written protocols of care for patients being transported and a training programme to ensure the proficiency of ambulance staff in carrying out these protocols.• EAS licensee must only transport emergency patients to the nearest public hospital that possesses the appropriate on-site specialties.• Where the patient has indicated (whether by express or implied instructions) to be ferried to a hospital of choice, licensees of the EAS and MTS must not influence the decision of the patient to be sent to a different hospital. This does not apply to an emergency patient, and they are to be sent to the nearest public hospital.
Handling of Medical Supplies and Equipment [ALL REQUIREMENTS ARE NEW]	<ul style="list-style-type: none">• EAS + MTS licensee shall ensure that there is an appropriate and adequate supply of medicines, medical supplies and equipment in the ambulance or medical transport vehicle (as the case may be).• EAS + MTS licensee shall ensure that all usage or administration of medicines, medical supplies and equipment is as advised by the CGO, documented in clinical care protocols, and is only administered by qualified and trained healthcare professional (e.g. doctors, specific ambulance crew who are approved by their CGO to do so in accordance to endorsed clinical protocols).• EAS + MTS licensee shall maintain and update an inventory of all medicines, medical supplies and equipment, and ensure they are in good working condition.
Infection Control [EXISTING]	<ul style="list-style-type: none">• EAS + MTS licensee shall ensure that there are appropriate measures and protocols in place to ensure adequate infection control (e.g. protocols on the handling of patients with infectious diseases).
Price Transparency [ALL REQUIREMENTS ARE NEW]	<ul style="list-style-type: none">• EAS + MTS licensee must display common charges.• EAS + MTS licensee must ensure that patients and their family or next-of-kin are informed of the cost of each item or service charged for the conveyance through itemised billing.

Overview of Service Requirements

Updated on
24 Aug 2021

Service Requirements	Summary
Specific Requirements for EAS [ALL REQUIREMENTS ARE NEW]	<ul style="list-style-type: none">• Portable Medical Isolation Unit (PMIU): EAS licensee must ensure written protocols on the proper use of PMIU and ensure service crew competency in the usage of PMIU.• Conveyance of patients medically evacuated into Singapore: EAS licensee must ensure written protocols on handling of medically evacuated patients and ensure the correct deployment of service crew with the necessary competencies in handling such patients.

Governance



[EXISTING] Duties of a Clinical Governance Officer (CGO)**Provision of clinical and technical oversight by a CGO**

- **Application**: One CGO is appointed for EAS / MTS*. The CGO and PO may be the same person.

*If a CGO is appointed for both EAS and MTS, that CGO must fulfill the qualification requirements of the EAS CGO.

- **Responsibilities**:

- Providing oversight of the clinical services
- Ensuring the training and education of all of the licensee's personnel
- **Should the knowledge of the CGO be limited in any specific area, they should inform the licensee and seek assistance from UPEC or other specialists.**

Things a CGO must do include:

- a) **Ensure that clinical protocols** relating to the assessment and management of patients are developed, implemented and maintained;
- b) **Conduct annual reviews of clinical protocols** and shall give the final endorsement;
- c) **Provide appropriate inputs to all audits** of the licensee conducted by MOH and take subsequent measures to ensure compliance with standards; and
- d) **Review the performance of the Service Crew** at least once every six months and recommend relevant and recognised training courses for the Service Crew to attend.

Additionally for an **EAS CGO**:

- a) Provide clinical consultation and medical advice to the licensee and service crew where necessary;
- b) Be involved in developing strategies for mass disaster response and/or special circumstances;
- c) Support mass casualty or disaster situations as required; and
- d) Attend meetings pertaining to PEC as required.

[ENHANCED] Qualifications of an EAS CGO

- **An EAS CGO must be a medical practitioner under full registration** who:
 - Is accredited by the SMC Specialist Accreditation Board for Anaesthesiology, Emergency Medicine, General Surgery, Intensive Care Medicine or any other specialty as approved by the Director with the SMC Specialist Accreditation Board; or
 - Has at least 10 years of relevant experience in Anaesthesiology, Emergency Medicine, General Surgery, Intensive Care Medicine or any other specialty as approved by the Director.
- **Hold valid certifications** for the following courses recognised by MOH:
 - Emergency Medical Services Medical Directors Workshop
 - Advanced Cardiac Life Support
- **[NEW] Must not have been subject to any disciplinary actions by the SMC for the preceding three years before appointment as a CGO**

[ENHANCED] Qualifications of an MTS CGO

- **An MTS CGO may be any of the following:**
 - **A medical practitioner under full registration with at least 5 years' experience, including at least 1 year experience** in either Emergency Medicine, Intensive Care, General Surgery, Anaesthesiology or any other discipline (as may be approved by the Director) that manages acute and critical patients; or
 - **A registered nurse under full registration with at least 5 years of nursing experience** in either Emergency Medicine, Intensive Care, General Surgery, Anaesthesiology or any other discipline (as may be approved by the Director) that manages acute and critical patients.
 - Current existing Clinical Directors of EAS and MTS providers, who may not fulfil the above but, with at least 5 years' experience in patient transport.
- **Hold valid certifications** for the following courses recognised by MOH:
 - Emergency Medical Services Medical Directors workshop
 - Basic Cardiac Life Support and Automated External Defibrillation
- **[NEW] Must not have been subject to any disciplinary actions by the SMC or SNB for the preceding three years before appointment as a CGO**

Compulsory for Clinical Governance Officer of EAS and MTS

- To set expectations for current and potential Clinical Directors.
- To provide information on:
 - ❖ The daily operations in managing a pre-hospital service
 - ❖ Latest developments in EMS practice
 - ❖ Medical responses to civil emergencies in Singapore
 - ❖ Risk management and supervision
 - ❖ Protocol Development / Writing
 - ❖ EMS Training and Education

Quality Assurance



To ensure safe delivery of the licensed service

- Maintain both a medical record system, and an ambulance or medical transport log system that records the movement of vehicles.
- Ensure performance monitoring, reporting and evaluation of the service provided.
- Ensure all adverse events are recorded and reviewed.
- Develop road and vehicular safety standards to uphold patient safety.

Personnel



[ENHANCED] Appointment of a Service Crew

Staff providing patient care are appropriate, qualified and adequate

- Licensee to appoint a service crew comprising the following personnel:
 - At least one qualified emergency ambulance driver (in the case of EAS) or a medical transporter driver (in the case of MTS); and
 - At least one crew leader who is an appropriately qualified Ambulance Paramedic, Ambulance Nurse or Ambulance Doctor.
 - MTS licensees may also appoint an Emergency Medicine Technician (EMT) as a crew leader
- Staffing numbers must commensurate with the number of vehicles.
- If the Service Crew comprises 3 or more staff, the additional crew member(s) should be a qualified Emergency Medical Technician (EMT), Ambulance Nurse, Paramedic or Ambulance Doctor.
- Service Crew must hold valid certifications. Trainees are not counted towards the staffing requirements of the Service Crew.

[EXISTING] Qualifications of a Service Crew

Crew Member	Requirement
Emergency Medical Technician (EMT)	<ul style="list-style-type: none"> • Be certified under an <u>EMT course</u> approved by the Director; • Hold valid certification in <u>BCLS and AED</u> usage; and • Be <u>certified in first aid</u> by any organisation recognised by the Director for the purpose • Must be able to properly <u>handle and operate all equipment on board</u> and be familiar with the licensee's medical protocols
Ambulance Nurse	<ul style="list-style-type: none"> • <u>Registered with the Singapore Nursing Board under Full Registration</u> and hold valid certification in <u>BCLS and AED usage</u> <ul style="list-style-type: none"> - EAS: Registered nurse only - MTS: Registered or enrolled nurse • Ambulance Nurse is appointed as a crew leader for EAS: Hold valid certification in <u>Life Support Course for Nurses</u> ("LSCN"), or ACLS.
Paramedic	<ul style="list-style-type: none"> • Be qualified under a <u>Paramedic course</u> approved by the Director; • Hold valid certification in <u>BCLS and AED usage</u> by any organisation recognised by the Director for the purpose.
Ambulance Doctor	<ul style="list-style-type: none"> • A medical practitioner under Full Registration who holds a valid certification in <u>both BCLS and AED usage and ACLS</u>
Ambulance Driver	<ul style="list-style-type: none"> • Possess a valid licence to drive the emergency ambulance or medical transport vehicle; • Be trained in defensive driving by a local organisation recognised by the LTA and be familiar with the appropriate use of sirens and beacon lights during conveyance of patients, if applicable • Possess valid certification for Cardio-Pulmonary Resuscitation ("CPR") and AED usage issued by an accredited body

Equipment and Licensed Conveyance



[EXISTING] Licensed Conveyance

Patients should receive care in a safe and suitable environment, using appropriate equipment

- Before a vehicle is used as an emergency ambulance or medical transport vehicle, the licensee must allow MOH to inspect the vehicle to ensure that it meets the requirements. If the vehicle meets the requirements, the vehicle details can be listed in the licence.
- Common vehicle requirements for EAS and MTS
 - Examples: Have a system compatible for communication with the Singapore Civil Defence Force or other designated medical dispatch system for ambulances, fitted with passenger and attendant seats and safety belts, equipped with appropriate navigational tools, meets LTA vehicle specifications
- **For EAS only**: Licensees shall ensure that every emergency ambulance vehicle is fitted with the following:
 - A siren and wail sound horn or two-tone horn; and
 - Red beacon lights.

[EXISTING] Licensed Conveyance

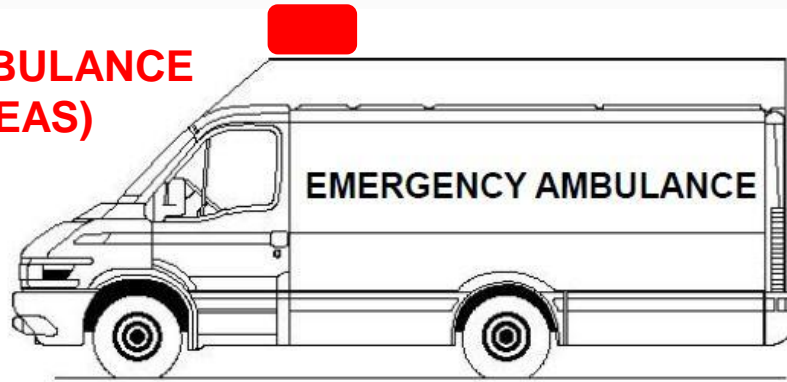
Patients should receive care in a safe and suitable environment, using appropriate equipment

EAS	MTS
<ul style="list-style-type: none">• Shall bear the letterings <u>“EMERGENCY AMBULANCE”</u> on the <u>front, both sides and rear</u> of the vehicle	<ul style="list-style-type: none">• Shall bear the letterings <u>“MEDICAL TRANSPORT”</u> on the <u>front, both sides and rear</u> of the vehicle
<ul style="list-style-type: none">• Shall be fitted with a <u>siren and wail sound horn or two-tone horn</u>; and <u>Red beacon lights</u>.	<ul style="list-style-type: none">• <u>Shall not bear</u> or identify itself as <u>“EMERGENCY AMBULANCE”</u> or similar, <u>nor be fitted with sirens and beacon lights</u>.
<ul style="list-style-type: none">• Siren and beacon lights are only used when travelling to and transporting an Emergency Patient.	<ul style="list-style-type: none">• Not used to convey patients who are assessed before or at the point of pick-up to be an Emergency Patient

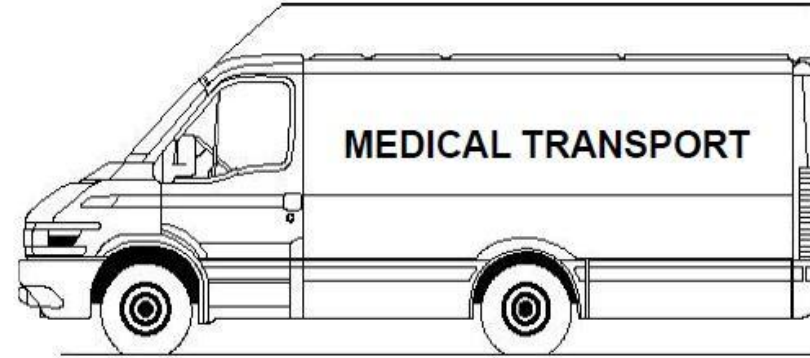
Equipment and Licensed Conveyance

[EXISTING] Licensed Conveyance

EMERGENCY AMBULANCE SERVICES (EAS)



MEDICAL TRANSPORT SERVICES (MTS)



[EXISTING] Equipment

Patients should receive care in a safe and suitable environment, using appropriate equipment

- Facilities and equipment in licensed conveyance are regularly checked and properly maintained.
- Each vehicle shall be equipped with#:
 - Appropriate airway, ventilation and intravenous equipment;
 - Appropriate cardiac and immobilisation devices;
 - Trauma supplies, equipment and medication;
 - Infection control and injury prevention equipment; and
 - Basic first aid kit equipment,

which are to be **functional and effective at all times** when the vehicle is in operation.

Medical Management



Appropriate and safe medical management of patients

- EAS and MTS licensees must put in place measures, including the establishment of written protocols where appropriate, to:
 - a) Determine whether the patient is an Emergency or non-Emergency Patient when the patient/next-of-kin (NOK) calls (at the initial conveyance request and/or en-route to the patient's location) and again upon arrival at the patient's location and clinical assessment of the patient;
 - b) Ensure appropriate management of patients, including that equipment and consumables are used where clinically justified.

“Emergency Patient” means an individual suffering, or believed to be suffering, from a medical emergency.

A “Medical Emergency” is an injury or a condition of acute or sudden onset that poses an immediate threat to a person's life or long-term health (e.g. cardiac arrest)

**MTS providers should advise the caller to contact 995 if the case is preliminary triaged as a Medical Emergency*

Appropriate and safe medical management of patients

- Licensees must establish written protocols that takes into consideration the acuity of a patient's medical condition. The protocols should include:
 - a) The appropriate manpower, equipment and vehicular requirements necessary for the transportation of patients;
 - b) Appropriate management of patients;
 - c) In cases where the EAS licensee owns a mixed fleet of EAS/MTS vehicles and service crew, there should be conditions for use of each vehicle, including but not limited to when emergency ambulances should be used, how it may be used to transport non-emergency patients and when the EAS service crew should be deployed. For example, beacons and sirens should only be used in emergency cases.

“Emergency Patient” means an individual suffering, or believed to be suffering, from a medical emergency.

A “Medical Emergency” is an injury or a condition of acute or sudden onset that poses an immediate threat to a person's life or long-term health (e.g. cardiac arrest)

If the medical transport service arrives at the scene and the patient is assessed to be an Emergency Patient or a PAC1 case, the on-site service crew must contact SCDF immediately.

[NEW] Requirements for medical management of patients

Patients should receive the earliest care possible at an appropriate treatment facility

- EAS licensees must transport Emergency Patients to the nearest public hospital with an A&E department that possesses the appropriate on-site specialties in either of the 2 scenarios:
 - Patients already in a state of cardiovascular collapse, or in imminent danger of collapse; or
 - All other Emergency Patients (non-ambulant but not in imminent danger of collapse) who have not given an indication (whether by express or implied instructions) to be ferried to a hospital of choice.

“Emergency Patient” means an individual suffering, or believed to be suffering, from a medical emergency.

A “Medical Emergency” is an injury or a condition of acute or sudden onset that poses an immediate threat to a person's life or long-term health (e.g. cardiac arrest)

Patients are well-informed of their conditions and options for treatment so that they are able to provide informed consent

- Where the patient **has indicated** (whether by express or implied instructions) to be ferried to a hospital of choice, **licensees of the EAS and MTS must not directly or indirectly influence the decision of the patient to be sent to a different hospital.** (*Save for conveying certain Emergency Patients to the nearest public hospital, as highlighted at Slide [27].*)
- **Patients or their family/next-of-kin are duly informed about their conditions and care plans**
- **Patients are provided with sufficient and relevant clinical information to make an informed decision**
 - Appropriate systems must be in place for obtaining consent from patients and maintaining proper records of the consent obtained

Medical Supplies & Equipment, Infection Control



[NEW] Handling of Medical Supplies and Equipment

Requirement	Summary
Usage of medical supplies and equipment	<ul style="list-style-type: none">• Purchase from authorised sources <u>licensed by the Health Sciences Authority</u>• Must have an appropriate and adequate supply of medicines, medical supplies and equipment• All usage or administration of medicines, medical supplies and equipment should be in accordance to the medical advice of the CGO, any written protocols and applicable requirements and restrictions under any written law.
Maintenance of medical supplies and equipment	<ul style="list-style-type: none">• Medical supplies and equipment are <u>regularly checked, replenished, and maintained and in good working condition when the emergency ambulance or medical transport is dispatched</u>• An <u>updated inventory</u> of medical supplies and equipment that are presently available for use is kept.

To prevent, control and contain any spread of infections

- Having protocols on the handling of patients with infectious diseases, including instructions on appropriate action to take in the event of exposure to blood or other body fluids/substances including needle-stick injuries and other incidents.
- Training and use of personal protective equipment such as N95 mask, gloves, gown/apron, face shield/ goggles, disinfectants.
- Decontamination of vehicles after transport of patients with infectious diseases, or in the event of contamination by body fluids, in accordance with the protocols or any written law or such standards/guidelines issued by MOH for the transportation and disposal of waste.
- Ensuring the Service Crew undergo the necessary vaccinations, and maintaining records of their immunisations, in accordance with the prevailing vaccination requirements for healthcare workers under the Workplace Safety and Health Act and any other prevailing circulars/guidelines issued by MOH.

Price Transparency



[NEW] Display of common charges and bill itemisation

Patients are provided with accurate information about charges for price transparency to make informed choices

- Adequate information on fees and charges are provided through fee display
 - Common charges must be prominently displayed on the premises/conveyance or website
 - These charges must also be conveyed to the patient and the patient's family or NOK upfront based on the preliminary assessment of the patient over the phone and **before the EAS or MTS accepts the patient.**
 - Any proposed changes to the patient's treatment plan arising from developments in the patient's condition during the conveyance should also be communicated to the NOK.
- Patients and their family or next-of-kin shall be informed of the cost of each item or service charged for the conveyance through itemised billing

Bill must be itemised and at the minimum, state the following categories of charges :

- Base fees
- Medication
- Usage of any equipment
- Consumables
- Additional service charges, if any
- Total fees payable

[NEW] Display of common charges and bill itemisation

Publication of fees benchmark for a smooth transition to HCSA

- Prior to HCSA coming into force, the ranges of fees charged by PAOs are published on the MOH website as a move towards price transparency.
 - These charges will be reviewed and updated periodically from the time it is first published on the MOH website.
 - The published fees are based on what the PAOs have declared and would neither be guided nor endorsed by MOH.
- Under HCSA, private ambulance providers **will be required** to publish their common charges for the public's reference as part of price transparency requirements.

Specific Requirements Relating to Emergency Ambulances



[NEW] Portable Medical Isolation Unit

Requirements for emergency ambulance service providers that uses or intends to use a **Portable Medical Isolation Unit (PMIU)** for or in the course of providing an emergency ambulance service

Category	Requirement
Notification to MOH	<ul style="list-style-type: none"> Emergency ambulance licensee must notify MOH not later than one month before the date on which the licensee proposes to use the PMIU.
Equipment/Conveyance requirements	<ul style="list-style-type: none"> The PMIU used or intended to be used is registered as a health product under the Health Products Act* The PMIU is used only in an emergency ambulance
Protocols	<ul style="list-style-type: none"> There must be written protocols for the appropriate use and maintenance of the PMIU and the use of the PMIU to monitor the medical condition of patients
Training and Competency of Service Crew	<ul style="list-style-type: none"> Members of the service crew deployed to each emergency ambulance who use the PMIU are trained and proficient in implementing the protocols Members of the service crew deployed to each emergency ambulance are trained and competent in the safe and proper use and maintenance of the PMIU

*In situations where a medically evacuated patient arrives in Singapore in or using a PMIU that is not registered as a health product under the Health Products Act, the members of the service crew deployed to the emergency ambulance used to convey the medically evacuated patient must be trained and competent in the safe and proper use of the PMIU (see slide 37 on the requirements for conveyance of medically evacuated patients)

[NEW] Conveyance of medically evacuated patients

Requirements for emergency ambulance service providers that conveys or intends to convey any patient who has been medically evacuated into Singapore

Category	Requirement
Notification to MOH	<ul style="list-style-type: none"> Emergency ambulance provider must notify MOH not later than one month before the date on which the licensee proposes to first convey any medically evacuated patient.
Equipment/ Conveyance requirements	<ul style="list-style-type: none"> A medically evacuated patient can be conveyed only in an emergency ambulance.
Protocols	<ul style="list-style-type: none"> There must be written protocols for the safe and appropriate conveyance of medically evacuated patients, including written protocols for the cleaning and disinfection of emergency ambulances used to convey medically evacuated patients
Ambulance Crew requirements	<ul style="list-style-type: none"> Specific for the conveyance of medically evacuated patients, the crew leader must be a medical practitioner or registered nurse who has relevant qualifications or training in anaesthesiology, emergency medicine, general surgery or intensive care medicine or any other specialty approved by the Director (crew leader requirements for general EAS conveyance do not apply) The crew leader must be positioned next to the medically evacuated patient and closely monitor the medical condition of the medically evacuated patient and be able to perform any resuscitative measures on the patient that may be necessary
Training and Competency of Service Crew	<ul style="list-style-type: none"> Members of the service crew deployed to each emergency ambulance used to convey medically evacuated patients are trained and proficient in implementing the protocols

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MOH will provide more information along the way



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The End

Thank you

