

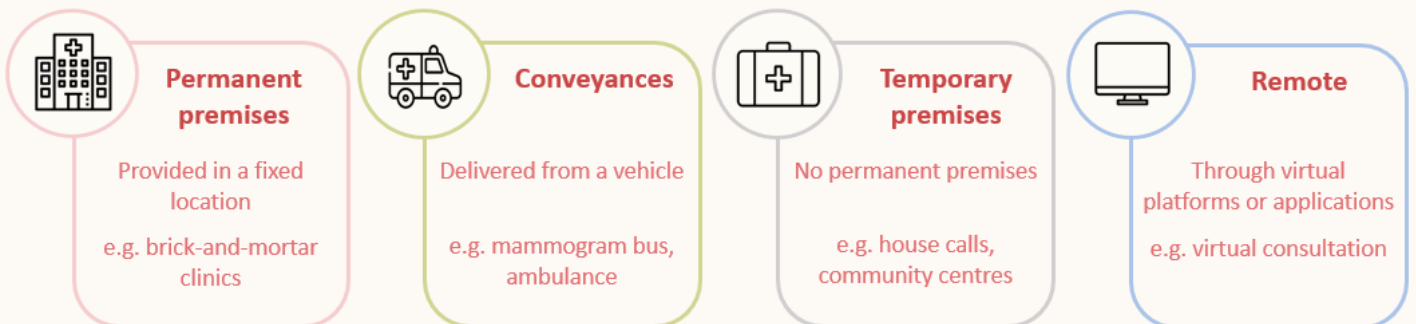
SUMMARY OF THE HEALTHCARE SERVICES ACT (HCSA) AMENDMENTS



The Healthcare Services Act (HCSA) was enacted in 2020 to replace the current premises-based Private Hospitals and Medical Clinics Act (PHMCA). On 6 March 2023, the HCSA (Amendment) Bill was passed in Parliament to further strengthen the regulatory framework and safeguard patients. This infographic outlines the key amendments applicable to licensees that will be implemented in mid June 2023.

Amendment 1 Regulation via four modes of healthcare service delivery

Licensees will hold **one licence for each licensable healthcare service (LHS)** and must **seek MOH's approval for any mode of service delivery (MOSD)** used to deliver the LHS.



Amendment 2 Introduction of an approval regime for the delivery of Specified Services (SS) and Clinical Governance Officer (CGO)

(A) Specified Services

Specified Services (SSes) generally involve complex or higher risk procedures provided in a LHS and have distinct requirements for patient safety. SSes include some of the specialized procedures and special care services in the Second and Third Schedules of the PHMC Regulations (e.g. radiation oncology, endoscopy), sub-disciplines of service within a LHS (e.g. different laboratory disciplines, imaging modalities) and newly identified procedures or services (e.g. collaborative prescribing, liposuction, dental cone beam computed tomography).

Licensees must seek MOH's approval prior to the commencement of these SSes under their licensed healthcare service.

(B) Clinical Governance Officer

An approval regime will replace the current notification regime to better safeguard patient safety and welfare.

Licensees will need to apply to MOH for approval for all CGO appointments 10 calendar days prior to the effective date of the appointment.

Amendment 3

Restrictions on the use of terms in licensees' names or logos

- (A) Licensees can only include terms in any language having the same meaning or having the intent to be associated with a particular medical specialty in their business name if:
- **There is relevant specialist employed or engaged by the licensees;** and
 - **The specialist is actively practicing that specialty under the licensee**

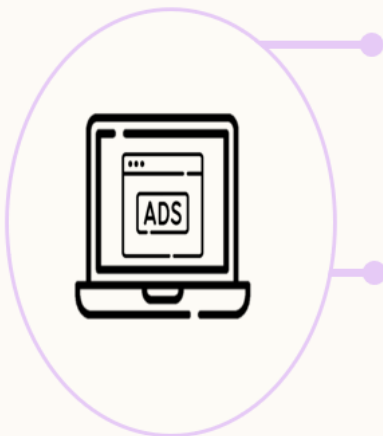
E.g. A clinic cannot be called "Cardiology Clinic" if there is no actively practicing Cardiologist working in the clinic

- (B) Licensees are prohibited from using the terms "Singapore" or "National" in any language in its name or logo without MOH's approval

E.g. A clinic cannot be named "The Singapura Clinic" or "National Clinic of Cardiology" without MOH's prior approval

Amendment 4

Advertising of healthcare services not licensed under HCSA must not be misleading



Prohibit non-HCSA licensees from claiming to treat medical conditions or diseases in any language when advertising healthcare services.

Example of non-compliance: "We are experienced in treating scoliosis" or "We can treat all chronic conditions such as diabetes, high cholesterol, hypertension"

Mandatory disclosure of qualifications in healthcare advertising for the use of "Dr" title by non-registered healthcare professionals.

Example: If you are a PhD holder, you must state the qualification and that the qualification is not a medical or dental qualification in the healthcare advertisement: "Dr ABC, PhD in Chemical Sciences, not a medical or dental qualification"

Example: If you are an overseas educated Doctor, and not registered with Singapore Medical Council (SMC), you must state it accordingly in the healthcare advertisement: "Dr XYZ, MBBS (Australia), not registered with SMC"

Amendment 5

Refined scope of restriction for individuals employed or engaged by certain licensees according to the degree of risk to patients' safety and welfare

As the roles of individuals employed/hired by licensees and nature of healthcare settings result in **varying degrees of risk to patients**, there is a need for a specified approach for different licensees and their employees. This requirement will be applicable to the following:

1. IMH to screen individuals who provide direct patient care only.
2. Nursing Homes and Hospices to screen individuals who have access to vulnerable patients.

Amendment 6

Waiver of 14 day notice period to effect modifications to licence conditions for groups of licensees in circumstances of immediate or imminent public safety

In special circumstances where there is imminent harm to patient safety, MOH will need to modify the licence conditions to require a group of licensees to **take immediate action to address urgent patient safety issues**. In such instances, the mandatory minimum 14-day period would be waived (e.g. In a pandemic or public health emergencies).

For modification of licence conditions for individual licensees, such as changes in response to non-compliances by the licensee, the mandatory minimum 14-day period will be retained, in the interest of natural justice.

Amendment 7

Redesignation of the “Director of Medical Services” to “Director-General of Health”

The Director of Medical Services will be re-designated the “Director-General of Health” to better reflect the job scope and responsibilities beyond medical services and achieve greater parity with the Director-Generals in other countries within the Ministries of Health.

You may find out more about the HCSA, General Regulations, and the HCSA (Amendment) Bill go.gov.sg/hcsa-resources.



Contact us if you have any further enquiries at HCSA_Enquiries@moh.gov.sg