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**Tuesday
17th January, 2006**

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Presented, and read the First time

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**Read a Second time; considered in Committee; reported without amendment;
read a Third time**

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**Read a Second time; considered in Committee; reported without amendment;
read a Third time**

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**Read a Second time; considered in Committee; reported without amendment;
read a Third time**

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**Read a Second time; considered in Committee; reported without amendment;
read a Third time**

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PARLIAMENTARY DEBATES SINGAPORE

OFFICIAL REPORT

TENTH PARLIAMENT

PART II OF SECOND SESSION

VOLUME 80

Tuesday, 17th January, 2006

The House met at 1.30 pm

PRESENT:

Mr SPEAKER (Mr Abdullah Tarmugi (East Coast)).

Mr Ahmad Khalis Bin Abdul Ghani (Hong Kah).

Mr Ang Mong Seng (Hong Kah).

Mr Cedric Foo Chee Keng (West Coast).

Mr Alexander Chan Meng Wah (Nominated Member).

Mr Chan Soo Sen (Joo Chiat), Minister of State, Ministry of Education and Ministry of Trade and Industry.

Mr Chay Wai Chuen (Tanjong Pagar).

Dr John Chen Seow Phun (Hong Kah).

Mr Chew Heng Ching (East Coast), Deputy Speaker.

Mr Steve Chia Kiah Hong (Non-Constituency Member).

Mr Chiam See Tong (Potong Pasir).

Assoc. Prof. Chin Tet Yung (Sembawang).

Mr Charles Chong (Pasir Ris-Punggol).

Mr Davinder Singh (Bishan-Toa Payoh).

Mr Arthur Fong (West Coast).

Mr Gan Kim Yong (Holland-Bukit Panjang), Minister of State, Ministry of Education and Ministry of Manpower.

Mr Andy Gan Lai Chiang (Marine Parade).

Dr Geh Min (Nominated Member).

Mdm Halimah Yacob (Jurong).

Mr Heng Chee How (Jalan Besar), Minister of State, Ministry of National Development.

Assoc. Prof. Ho Peng Kee (Nee Soon East), Senior Minister of State, Ministry of Law and Ministry of Home Affairs.

Mr Inderjit Singh (Ang Mo Kio), Deputy Government Whip.

Ms Indranee Rajah (Tanjong Pagar).

Prof. S Jayakumar (East Coast), Deputy Prime Minister, Coordinating Minister for National Security and Minister for Law.

Mr Khaw Boon Wan (Tanjong Pagar), Minister for Health.

Dr Amy Khor Lean Suan (Hong Kah).

Assoc. Prof. Koo Tsai Kee (Tanjong Pagar), Senior Parliamentary Secretary to the Minister for Defence and Minister for the Environment and Water Resources.

Dr Lee Boon Yang (Jalan Besar), Minister for Information, Communications and the Arts and Government Whip.

Mr Lee Hsien Loong (Ang Mo Kio), Prime Minister and Minister for Finance.

Mr Lawrence Leow Chin Hin (Nominated Member).

Mr Lim Boon Heng (Jurong), Minister, Prime Minister's Office.

Dr Michael Lim Chun Leng (Pasir Ris-Punggol).

Mr Lim Hng Kiang (West Coast), Minister for Trade and Industry.

Mrs Lim Hwee Hua (Marine Parade), Minister of State, Ministry of Finance and Ministry of Transport.

Mr Raymond Lim Siang Keat (East Coast), Minister, Prime Minister's Office, Second Minister for Finance and Second Minister for Foreign Affairs.

Mr Lim Swee Say (Holland-Bukit Panjang), Minister, Prime Minister's Office and Deputy Government Whip.

Mr Loh Meng See (Jalan Besar).

Dr Loo Choon Yong (Nominated Member).

Miss Penny Low (Pasir Ris-Punggol).

Mr Low Thia Kiang (Hougang).

Mr Mah Bow Tan (Tampines), Minister for National Development and Deputy Leader of the House.

Mr Matthias Yao Chih (MacPherson).

Encik Mohamad Maidin B P M (Marine Parade), Senior Parliamentary Secretary to the Minister for Home Affairs.

Dr Lily Neo (Jalan Besar).

Dr Ng Eng Hen (Bishan-Toa Payoh), Minister for Manpower and Second Minister for Defence.

Ms Irene Ng Phek Hoong (Tampines).

Ms Eunice Elizabeth Olsen (Nominated Member).

Mr Ong Ah Heng (Nee Soon Central).

Dr Ong Chit Chung (Jurong).

Mr Ong Kian Min (Tampines).

Dr Ong Seh Hong (Aljunied).

Assoc. Prof. Ong Soh Khim (Nominated Member).

Mr Othman Haron Eusofe (Marine Parade).

Mdm Cynthia Phua (Aljunied).

Prof. Ivan Png Paak Liang (Nominated Member).

Mr R Ravindran (Marine Parade).

Mr Seng Han Thong (Ang Mo Kio).

Mr K Shanmugam (Sembawang).

Mr Sin Boon Ann (Tampines).

Dr Tan Boon Wan (Ang Mo Kio).

Dr Tan Cheng Bock (Ayer Rajah).

Mr Tan Soo Khoon (East Coast).

Dr Tan Sze Wee (Nominated Member).

Mr Teo Chee Hean (Pasir Ris-Punggol), Minister for Defence.

Dr Teo Ho Pin (Holland-Bukit Panjang).

Mr Teo Yock Ngee (Nominated Member).

Mr Tharman Shanmugaratnam (Jurong), Minister for Education.

Dr Tony Tan Keng Yam (Sembawang).

Dr Wang Kai Yuen (Bukit Timah).

Mr Wee Siew Kim (Ang Mo Kio).

Mr Wong Kan Seng (Bishan-Toa Payoh), Deputy Prime Minister, Minister for Home Affairs and Leader of the House.

Assoc. Prof. Dr Yaacob Ibrahim (Jalan Besar), Minister for the Environment and Water Resources and Minister-in-charge of Muslim Affairs.

Encik Yatiman Yusof (Tampines), Senior Parliamentary Secretary to the Minister for Information, Communications and the Arts.

Oral Answers to Questions

[Mrs YU-FOO YEE SHOON]

plus. I am sure the hon. Member also knows that in our society, even the participation rate in the workforce, it is about 54% for women and over-70% for men. So, whether you like it or not, there is still a big gap between the needs of men and women. Women's participation in all walks of life still needs to be enhanced. Therefore, we tend to protect women more. But under the Penal Code and Women's Charter, we do protect violence against all members of family, including the aged, children, men or women. I am sure when men go to a Family Service Centre, they do get the same treatment.

Assoc. Prof. Ong Soh Khim: Sir, the Minister of State has not answered my question on how easy it is to validate a claim of abuse by men and what are the steps taken. To follow up with the question asked on the participation of men and women in the workforce, it is not on the same basis to compare a labour participation rate to protect women and men. So, I would like to find out what are the steps that are in the pipeline to protect men since men's participation rate in the labour workforce is more than 70%, and all the more they have to be helped and counselled.

Mrs Yu-Foo Yee Shoon: Mr Speaker, Sir, I do agree with the NMP. I have already mentioned that when they go to the Family Service Centre, they will get the same treatment, which means that they will counsel them, ask them to fill up the forms, state what is the problem, and whether it is serious enough for them to apply for PPO, or whether they want to go to court, or file for a divorce, and so on. So we give the same treatment and the same steps of counselling to both men and women. But, like I say, men tend to think that they can handle the situation. So not many of them really go to a shelter home or seek for a crisis shelter, but more

women go to a shelter home. So we give the same treatment, and we also train the counsellors to handle both genders properly. If it is really urgent, they can report to SOS or they can go to the police.

RESIGNING PUBLIC SECTOR DOCTORS

(Permission to take personal information of patients)

7. **Prof. Ivan Png Paak Liang** asked the Minister for Health whether public sector doctors are permitted to take personal information of patients with them when they resign and enter private practice and, if not, what are the procedures to guard against such practices.

The Minister for Health (Mr Khaw Boon Wan): Mr Speaker, Sir, Prof. Ivan Png asked if a public sector doctor who leaves for the private sector can take his patient records along with him. The answer is "no".

In public hospitals, doctors are the employees. When a person is treated in a public hospital, he is a patient of the hospital and not the patient of a specific doctor. A departing doctor therefore cannot simply take along patient records residing in public hospitals with him. However, some patients may choose to continue the treatment by the doctor in his new clinic. In such cases, if the patients express their wishes, the hospital will facilitate the transfer of copies of the relevant medical information to the resigning doctor.

This is spelt out in hospital policies and our hospitals have in place processes to guard against any abuse. For example, doctors have to sign out medical records for their use and there are regular checks and random audits to ensure compliance.

In addition, the Singapore Medical Council has an ethical code and guidelines

Oral Answers to Questions

governing, among other things, how the resigning doctors should notify their patients of their impending change of practice arrangement. Our public hospitals, as well as the Council, will investigate any complaint of professional wrongdoing.

Prof. Ivan Png Paak Liang (Nominated Member): Sir, two supplementary questions for the Hon. Minister. First, what are the procedures regarding doctors who practise both in the public sector and the private sector? We do have doctors who practise in both places at the same time. How do we safeguard against the transfer of information in such cases?

Secondly, the Hon. Minister referred to the Medical Council and other guidelines. How do we ensure that doctors when they move between sectors or from one sector to the other sector, they do not take the medical records but they may take names and phone numbers, and that may be all that is enough to solicit business from the public sector patients?

Mr Khaw Boon Wan: Mr Speaker, as I said, the guidelines are there, the code of ethics are there, and if there are wrongdoings, we investigate. And the professional will know that if there is an abuse of such privilege, there will be penalty whether by the employer or by SMC. Of course, in practice, you cannot stop a doctor from remembering the names of his patients. But the point is that patients have a choice. Because at the end of the day, you cannot drag the patient to the clinic. But if a patient decides that he wants to continue the treatment wherever it may be, it is his personal choice. I think, in any case, we should facilitate that. The key point is that medical records belong to the hospital wherever you practise, whether you are in the public or private sector. When you are in the hospital campus, then you have to do as the Romans do when in Rome.

EMPLOYMENT OF CONTRACT WORKERS**(Trends)**

The following Question stood in the name of Mdm Ho Geok Choo –

8. To ask the Minister for Manpower (a) how prevalent is the trend of employing contract workers in the various sectors; (b) if any study has been done to find out why employers are turning to contract employment; and (c) if this trend is a result of the high cost of hiring full-time employees.

Dr Amy Khor Lean Suan (Hong Kah): Question No. 8, Sir.

The Minister of State for Manpower (Mr Gan Kim Yong) (for the Minister for Manpower): Mr Speaker, Sir, the number of workers employed on short term contracts of less than one year rose from 59,400 in 2001 to 100,900 in 2004. Their share of employment has correspondingly increased from 2.9% in 2001 to 4.9% in 2004. Around four out of every 100 workers in a manufacturing sector were on short term contracts. The services sector had a slightly higher proportion – about five out of every 100 workers – mainly in the retail trade, restaurants, businesses, and transport and supporting services.

Industry feedback suggests that companies hire contract workers for two main reasons. Firstly, with more volatile business environment and conditions and shorter product cycles, some companies prefer to keep only their core workforce and engage contract workers to undertake the non-core activities. This provides greater flexibility in managing their manpower resources and enables them to avoid retrenching excess workers when they face a severe business downturn. Companies may also turn to contract workers with specific skill sets not available within the company, for short-term project work or consultancies.

WRITTEN ANSWERS TO QUESTIONS**TERRORIST DRILLS****(Safety measures)**

1. **Assoc. Prof. Ong Soh Khim** asked the Deputy Prime Minister and Minister for Home Affairs with regard to terrorist drills to be held during peak hours where the public will not be pre-warned, (a) what measures will be put in place to prevent stampedes, especially of young children and senior citizens who may be weak; and (b) who will be held responsible should fatalities happen during these drills.

Mr Wong Kan Seng:

The public will be pre-warned of an emergency exercise so that they are mentally prepared. We are mindful that any surprise emergency exercise involving large numbers of the public may lead to unnecessary panic and anxiety. Prior to an exercise, there will be publicity to give an indication of when the exercise would take place and what the public should expect. On the day of the exercise and just before the exercise commences, signs are put up and announcements are also made to assure the public that an exercise is being conducted and that there is no need to panic. Staff are deployed to guide, answer queries, and to explain the situation to members of the public who are affected by the exercise and who may not have understood the announcements. In addition, safety officers are deployed to look out for the safety of the public and to prevent accidents. Teams of paramedics and ambulances are also put on standby to respond to any injuries.

The question of whether anyone would be responsible should there be a fatality during an emergency exercise depends on whether there is any negligence in the conduct of the exercise or the actions of the officers involved. The public can rest assured that every precaution will be taken to guard against this during the planning and execution of the exercise.

OVERHEAD PEDESTRIAN BRIDGES**(Accessible to elderly and disabled)**

2. **Mdm Halimah Yacob** asked the Minister for Transport whether the Ministry will (i) consider modifying the existing overhead pedestrian bridges which have very high steps, to make them more accessible to the elderly and disabled persons; and (ii) ensure that all new overhead pedestrian bridges that are built, will be elderly and disabled-friendly.

Mr Yeo Cheow Tong:

Mdm Halimah Yacob asked if pedestrian overhead bridges (POBs) will have lower steps to make them more accessible to the elderly and the disabled, and whether the new bridges that LTA builds will be elderly and disabled-friendly.

As mentioned in our response to a similar query by the Honourable Member **Mr Ivan Png** at the last Committee of Supply, LTA has revised the design of the staircases of new POBs to conform to BCA's Code of Practice on Barrier-Free Accessibility in Buildings since 2000. The step heights of POBs have been reduced from 175mm to 150mm while the

Written Answers to Questions

step widths have also been increased from 288mm to 300mm. As for existing bridges, the new standards will apply as and when they are due for replacement as it is not cost effective to conduct a massive replacement exercise.

Going forward, LTA will look into providing ramps for POBs where there is a need, for instance, where there are no at-grade crossings nearby, and where space permits. Generally this applies to POBs spanning expressways and semi-expressways. In addition, LTA will also be implementing colour contrast strips at the edge of each step to enable the elderly and the visually handicapped to discern the steps better.

Much as we would like to make POBs more accessible to the elderly and the disabled, it is not possible to provide ramps across-the-board, given that many POBs are located in densely built-up areas, with land-take constraints. In fact, at-grade crossings are more accessible than POBs and are the preferred form of crossing for the elderly and physically challenged. Therefore, to better meet the needs of this group, LTA will endeavour to provide more at-grade crossings at suitable locations.

ASSISTIVE TECHNOLOGY FUND**(Increase and flexibility)**

3. **Assoc. Prof. Ong Soh Khim** asked the Minister for Community Development, Youth and Sports (a) if his Ministry will increase the cap of \$10,000 per disabled person over their lifetime for the Assistive Technology Fund scheme; and (b) if not, whether there will be a flexibility to adjust the funding cap for this scheme based on the applicant's need, as justified by the social worker and/or therapist from the volunteer welfare organisation or hospital.

Dr Vivian Balakrishnan:

The Assistive Technology Fund (or AT Fund) was launched in October 2003 to help persons with disabilities to purchase assistive devices, so as to help them integrate into society and be economically active.

Early this year, my Ministry enhanced the scheme on the basis of feedback from beneficiaries and users of the Fund. As a result, low income applicants today receive a grant of up to 90% of the cost of assistive devices, instead of 75% previously. The National Council of Social Service (NCSS), which administers the Fund, would disburse the grant according to the financial needs of the applicant. Needy applicants who are unable to pay their share of the cost despite the subsidy can approach NCSS, which will look at each case based on its own merit.

To-date, the grants under the AT Fund are sufficient for most persons with disabilities. Based on applications to date, the average cost of assistive technology devices is about \$3,160. Only two out of the 122 cases required a grant that was near the \$10,000 cap.

NCSS is also setting up Assistive Technology Centres (ATCs) to help the disabled acquire affordable assistive technology devices. The ATCs will help the disabled with the procurement, training, maintenance, and after-sales support. To keep the technology affordable, the ATCs will work with the private sector in the research, development and