

# Voicing Out

By Dr John Chiam, Editorial Board Member

The letter on the facing page is addressed to every House Officer and Medical Officer in the "system".

With the scourge of SARS firmly on the retreat, as tourists flock back to Singapore, and with life slowly but surely returning to normal again for the rest of us, there is that dangerous tendency that – despite the thermal scanners and in spite of the continued presence of the ubiquitous N95 mask – we'd bring out the champagne, give ourselves the customary pat-on-the-back for a job-well-done, and allow the memory of the pain of a bad dream to fade away.

And, with the fading of that bad dream, it is easy enough to send the many nameless junior doctors (yes – you guys – those who hardly garnered a mention, except perhaps for poor Hok Su) back into your mundane routine of being the supposedly overworked, overstretched, underpaid House Officer or Medical Officer that you were, before SARS started.

It therefore comes as no surprise that recent letters to the Forum of the Straits Times have highlighted the plight of junior doctors and the unhealthy (and quite inhumane) working conditions that await these junior doctors in the service.

But, are things really as bad today, as they were a decade or two ago? Undeniably, the pay has improved for the junior staff. In fact, the House Officer today takes home in basic pay sans night-call allowances, more than what I ever did, with a dozen calls a month under my belt and 20 years shortened from my lifespan.

Night-calls have been capped at a "manageable" six a month (maximum) for the junior staff. In my days (and I'm beginning to sound like a specimen from Jurassic Park), if I landed only six calls a month, I'd be accused of being the department's blue-eyed-boy, and sucking up to the roster-maker.

Similarly, the graduating year of 2004 will turn 200 medical students into wide-eyed and open-jawed interns: nearly double that of the graduating class a decade ago. This should, in theory, help alleviate some of the chronic manpower shortage that has long been the bane of every House Officer/Medical Officer worth his or her salt.

Yet, patient demands and "customer satisfaction" (that's a different topic altogether, for a very different day) have also skyrocketed – perhaps much more than whatever pay increments and incentives that have trickled their way into the junior ranks' pockets.

The all too real concern of litigation has also increased, almost exponentially, with very real fears that medical insurance providers may either collapse from the burden of payouts, or pull out before that happens.

The shift in paradigm – from us doctors being healers to patients, to us being service providers to ensure customer satisfaction – is also one that many junior doctors have no choice but to come to terms with.

When the SMA ran out a survey in 1995 to gauge the responses of the junior staff, many interesting responses

were received. Some of these heartfelt concerns touched on bread and butter issues such as night-call remunerations (or lack thereof) and salaries. And, things DID change for the better, with the introduction of night-call allowances and a revamping of the salaries that soon followed.

While the SMA cannot claim the survey to be the sole reason that affected the changes in the system, the SMA certainly gave a voice to the junior doctors to have their concerns heard and their feelings recognised.

How are the junior doctors – the House Officer and the Medical Officer – dealing with the system TODAY? What new challenges do you face today, despite the many apparent improvements to the system as a whole? And how different are your concerns today, compared to the concerns of your colleagues nearly a decade ago?

Well, I believe these are pertinent and important questions that need to be answered. In an article I wrote ("Taking care of ourselves") for the May 2003 issue of the SMA News, I lent a voice to the frustrations and concerns of some of the House Officers and Medical Officers with whom I had the pleasure and honour of working.

With the launching of the SMA Medical Officer & House Officer Survey 2003 in this issue of the SMA News, we hope to be able to lend a voice to EVERY junior doctor in the system, who may have an idea (or ideal) to share, angst to unload, or simply, something to say.

This is your chance to say it. ■

#### Note:

1. For the report on the results from the 1995 Survey, see page 6.
2. Look out for the survey form in this month's mailbag. Alternatively, you can email your thoughts to us at [survey2003@sma.org.sg](mailto:survey2003@sma.org.sg). All feedback will be treated **confidentially**.



#### About the Author:

Dr John Chiam, MBBS (1998), MRCP (2001) joined the SMA Editorial Board and the SMA Council on the promise that he'd give his fellow junior colleagues a voice that will be heard. So far, he's been making plenty of noise, and thankfully, no one's locked him up... yet. He hopes as many of his fellow junior colleagues (the HOs and the MOs) will support this survey, and in the process, keep him out of jail for a while yet.

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6 Sep 2003, 2.30 pm & 7.30 pm  
University Cultural Centre Theatre, NUS

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- \$15 free seating; 20% discount for block booking of 10.
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