



The Hobbit's Mailbox

A*Star Supernova?

Dear Hobbit,

I understand that Johns Hopkins is now seeing subsidised oncology patients in Tan Tock Seng Hospital. Also, recently I read that Johns Hopkins is heading for a break-up with A*Star. Johns Hopkins is the only non-governmental outfit allowed access to government subsidies. In the past, I surmised that they can treat subsidised patients because they had great people here to do research and their research needed patients. But with the research part disbanded, what reason is there left for Johns Hopkins to be able to continue with this privilege?

We can do a good job treating subsidised patients like Johns Hopkins, if we have the subsidies. Also, we can bid for the subsidy and see who can do a better job at a lower price. Us – local boys – or big names from overseas like Johns Hopkins, Mayo, Sloane Kettering, Anderson, and so on. All we ask for is a level playing field.

Dr Ang Khoo Koo, Oncology Consultant
Rutherglen Eagles Hospital and
Mount Doom Hospital

Kong Simi?

Dear Halfling,

Recently, there has been a lot of press about doctors who do not speak the language or dialect of our patients. Of course our young cannot speak dialect. It all happened in the 1970s when they dubbed the dialect shows into Mandarin. But all is not lost. What we should do is speak in the language of Singaporeans – money.

Maybe we should tell our staff in the polyclinics this: if you speak two languages, we will give you a \$50 allowance. Three languages and we will give you another \$50 a month. Every dialect that one speaks – another \$50 allowance. Colour stickers can be placed on staff's nametags to denote language proficiency (like what they did in the armed forces previously). Then we tell our old folks this – if you ask for anyone-other-than-English-speaking doctor, pay \$2 extra, from \$4 to \$6. If you can settle for an “*angmoh kantan*”, then pay only \$4. There is a \$2 language surcharge. The polyclinic or hospital keeps \$1 and \$1 goes to

the linguistically-inclined doctor, on top of their language allowance.

This is the market at work. In the private GP market, dialect-speaking doctors command a premium, as do those who speak Bahasa Indonesia in the private hospitals. Maybe this will send the message home to public sector doctors, nurses and patients alike that there is a premium to language proficiency in the real world.

After all, I am so successful in Middle Earth because I can speak Human, Elvish, Dwarvish and in addition to Orcish, my mother tongue. You will then be surprised how many people will start learning Malay and dialects and how many patients will suddenly learn English, Malay and Mandarin.

Yours sincerely,

Oscar, the Multilingual Orc, Medical Officer
Twin Towers Polyclinic

Status Optimus Paralyticus

Dear Hobbit,

Recently, I read in *The Straits Times* Recruit Section (15 July 2006, R46) that the Ministry of Health (MOH) is looking to hire a “lead consultant (healthcare processes)”.

The job scope was described to be as such: “You will lead efforts to optimise workflow in MOH family including hospitals/institutions with the aim of improving service levels. You will be responsible for the formulation, review of policies, strategies, programmes and systems to achieve optimum work processes and service.”

Alamak, does this job scope not sound exactly like what the clusters were supposed to do? Why is it that after all these years of clustering, MOH still appears to be looking to “optimise workflow” and “achieve optimum work processes and service”? After millions of dollars spent by clusters on hiring more and more administrators and management consultants, why does MOH still need to hire an in-house “lead consultant (healthcare processes)?” Oh dear, oh dear, oh dear.

By the way, do you know how much this job pays? I want to apply for this MOH job.

Pneumo-cephalus Buccal Enormous
Retrenched McKinkey Consultant

How Come I Am Still Scum?

Dear Ring-bearer,

I am quite distressed. Recently, my head of department summoned all of us medical officers to a meeting. He declared, "Our housemen ratings are low and few housemen want to join us, despite the fact that we have some of the best teachers and training programmes. The most oft-cited reason is heavy workload. To address this problem, our department will, with immediate effect, consider housemen 'supernumerary'. They will do nothing serious. All of you are to regard them as superfluous to requirements. They will only clerk patients and perform procedures if they feel like it. All real work is to be done by medical officers. On top of that, they must get post-call, tea breaks, Sundays off and lunch. Please, *tolong, tolong, sayang* them a bit. This is a key performance indicator in our departmental scorecard. If we screw this up, none of your consultants will get our bonus!"

Just yesterday, my houseman said since he is 'supernumerary', he will only follow ward rounds and do changes if he 'feels up to it'. I thought after I become a medical officer, I will cease to be the lowest living life form, but it appears I am still the scum of the earth!

Can I be a houseman again?

Yours Lowly,

HOMO Tan

Bleeding

Dear Hobbit,

I have been referred to you by your friend, Sammy Boy the Wise Bandage aka Samwise of Gamgee Plaster Company.

Recently, my Chief Executive Officer (CEO) told me that my department was losing money and if I do not buck up, I will lose my headship. I am very upset. Since when did haematology make money in a public hospital? But I have been doing well actually. I have pioneered many bone marrow transplant breakthroughs but now I am asked to balance the books! If I knew how to balance books, I would have become the Chief Financial Officer (CFO) of this hospital, not a haematologist!

To add insult to injury, the CEO showed me the new organisation chart of the hospital. She told me that I could get advice from the CFO, the Finance Director, the Service Operations Director, the Business Development Director, the Business Development Operations Director, Marketing Communications Director, Marketing Director or

Director of Special Projects. Failing which, I could approach any of the Deputy and Assistant Directors that reported to each of these Directors.

I never knew there were so many directors in our hospital. What do they and their deputies and assistants actually do anyway? Do they see patients? Give nursing care? Or at least bring bedpans or change bed-sheets? How much do they cost?

Then recently at a senior management retreat, the Human Resource Director gave a presentation which showed that the number of administrators equaled the number of doctors in the organisation! My worst fears were confirmed – we were being bled dry while administrators have been allowed to multiply faster than The White Wizard's Orcs!

As all elves must finally do, I think I will set sail for the Eastern Isles – the sooner the better – at least while I am still responsible for my own profit or loss there, I do not have to feed so many directors!

Professor Patricia Pallor Chen aka 'Spikey Oto'
Disillusioned Wood Elf and Head, Haematology
Middle Earth General Hospital

Size Matters

Your Shortness,

Yesterday my drug representative told me he was raising his prices for a proprietary anti-diabetic drug by 20%. I argued with her, "Your company is a US company and the US dollar has fallen against the Singapore dollar. On top of that, I have raised my purchase volume by 20%! How can you raise prices?"

She replied with a sheepish smile, "I am sorry, we have to give lower prices to the clusters since the group purchase office, which the clusters run, is always pressurising us to do so. To protect our overall profits for Singapore, we have to raise your prices. We have to keep our jobs, you know. Anyway, here is another drug pen. I hope that makes you feel better."

This is terrible. Does that mean while big pharmaceutical companies maintain profits and clusters get lower prices, GPs get whacked in the process? How can we ever compete?

Dr Dodo Avian Tan
Risus Sardonicus Medical Clinic

Readers who wish to contact Hobbit can write to hobbit@sma.org.sg. However, Hobbit does not guarantee that your letters will be published. Hobbit also does not guarantee that he will even acknowledge your letter. In fact, according to the Wikipedia, hobbits are a fictional race who exist only in J R R Tolkien's equally fictional universe of Middle Earth.