

بِسْمِ اللّٰهِ الرَّحْمٰنِ الرَّحِیْمِ



Press Statement Islamic Medical Association of Malaysia (IMAM)

Doctors Absent at Work: Let's Us All Be Part of the Solution

1) Referring to the recent highlighted issue of House Officers (HO) making up the highest number of civil servants served with termination notices (<http://www.freemalaysiatoday.com/category/nation/2017/02/13/hospital-interns-get-fired-the-most-among-civil-servants/>) and increase number of House Officers quitting or were terminated from the government service as high as 1.2 per cent (<http://www.nst.com.my/news/2017/02/212611/doctor-dilemma-why-are-malaysias-housemen-buckling-under-pressure?m=1>), IMAM would like to express our concern with the current situation.

2) Without trying to point fingers to only a few people or bodies, IMAM would like to highlight a few important points for all of us to ponder on why the situation above is happening. Instead of only blaming it on the House Officers, maybe it is time for us to evaluate whether any factors in a multi-factorial situation concerning the House Officers can be remedied.

3) No matter how harsh we complain and criticise these young doctors, we ourselves the earlier generations also had contributed a huge portion of the problem to be accountable for. Looking at the bigger picture, it is not just an issue in medical profession; it is potentially a national & global issue which requires careful consideration. Taking the recent National Health Services (NHS) crisis as an example, it will be wise for all of us to acknowledge that there is a problem brewing in our local setting as well.

4) Undeniably, there are problematic individuals in every profession. However, to generalize the whole profession for the act of irresponsible few is perhaps unjustified.

5) IMAM would like to suggest for respective stakeholders to be part of the solutions and stop the blaming game.

6) These are our suggestions for the respective stakeholders:

AUTHORITIES

a) For close monitoring of local medical universities/colleges and also a revision of the accepted abroad universities and colleges especially the amount of in-hospital training

b) To strengthen the preparation of medical graduates by revising the House Officer's Program Transformasi Minda (PTM) & Hospital Orientation Programs. A high impact behavioral training program & clinical preparatory program will holistically prepare these graduates for the challenging housemanship period.

c) To consider providing allowance for specialists or consultants who are involved actively in house-officer supervision & training. This will be one motivating factor as well as a recognition for the effort and hours that the senior doctors are investing for their house officers.

EDUCATION AUTHORITIES

a) We understand that the Malaysian Medical Council (MMC) has taken cognizance of the issues of quality of our medical graduates and that apart from the cognitive and psychomotor, the affective domain which involves emotions, feelings, attitudes, motivations and values are similarly mainstreamed and emphasized.

b) The cognitive and psychomotor has been overly emphasized in the medical school curriculum at the expense of the affective domain, thus failing in the holistic development of the medical student. Thus choosing the right candidates to enter medical school should also be emphasised.

c) Universities/Colleges also should look into their medical programmes and pro-actively seek feedback about their graduates from respective hospitals as to find out whether any aspects can be improved.

d) Ideally an analysis on the cause of the problem among the young doctors should be conducted with collaboration between the medical schools and the respective hospitals.

COMMUNITY

a) Health related NGOs and senior doctors in the profession are encouraged to promote psychological safety ie conducive & amiable working environment for everyone (junior doctor, nurses, etc).

b) Where there are gaps in the wholesome training of the medical students and housemen, health related NGOs should help fill the void.

c) IMAM has undertaken various activities among medical students and junior doctors to reinforce their positive mindset, build their character and energise their passion to care. We involve them directly in our voluntary projects which includes health camps serving the disadvantaged and marginalized in the Orang Asli settlements, the homeless and the refugees.

d) We have organized a whole series of Housemen Preparatory Courses, not only as survival guide as a houseman but also to excel as a doctor during this challenging phase in their career pathway.

e) And looking beyond the housemanship phase, we have organized career pathways courses, mentored by IMAM's alumni of consultants, to project their vision

towards their future medical careers.

f) We encourage young doctors to be pro-active in building their medical knowledge and skills base and participating in the available preparatory courses and health camps.

PARENTS

a) Parental guidance plays a huge part as coping mechanism is mostly influenced by parenting methods. Even before that, parents must understand the rigors of medical training. How many a time we hear "I did not want to be a doctor. It was my parents wish". Thus we have reluctant young doctors who never did want to be a doctor and it is not hard for that person to quit training.

b) We encourage parents to be positive, avoid "helicopter-parenting" methods and to support our young doctors with encouragement & good understanding and gently guide them in the career pathway.

DOCTORS

a) The young generation of doctors also must realise that they are entering a career full of challenges & as they begin their journey in their career, they are also beginning the journey of adulthood and maturity.

b) Whereas the experience generation of doctors should in open arms guide, provide assistance, facilitate and lead by example towards these new doctors. Both young and more experience doctors should be accountable & responsible to maintain the integrity of the profession.

c) Each and every person in the medical fraternity is important when it comes to the care of our patient– we cannot work alone we need to be there for each other.

“The believers, men and women, are Auliya (helpers, supporters, friends, protectors) of one another....” (At-Taubah verse 71)

d) We should honour this responsibility and always think of it as an opportunity to do good for ourselves and others not just in this world but especially in the hereafter.

e) We encouraged the young doctors to be pro-active in building their knowledge & skills as well as engaging actively with their seniors (medical officers, specialists and consultants) for guidance & assistance in their daily tasks.

f) In the final analysis, the young doctors should realize that this period of housemanship training, no matter how difficult it maybe, is fundamental to their growth as a healthcare professional and their preparedness for future and even bigger clinical responsibilities.

"Because of that, We decreed upon the Children of Israel that whoever kills a soul unless for a soul or for corruption [done] in the land – it is as if he had slain mankind entirely. And whoever saves one – it is as if he had saved mankind entirely." (Al-Maidah verse 32)

7) We urge every stakeholders, members of the community, doctors and health personnel to work hand in hand to provide the best solutions in handling this situation for a brighter future for Malaysian healthcare.

Let's all be part of the solution.

Dr Azlan Helmy Abd Samat

Secretary General

Islamic Medical Association of Malaysia (IMAM)

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* Islamic Medical Association of Malaysia (IMAM) is a non-government organisation (NGO) formed since 1990 and has more than 3000 healthcare Muslim professionals members.