

How to produce more resilient doctors in Malaysia

By **CHESTER CHIN**

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THE thought that someone's life dangles at your fingertips is a heavy burden.

But that responsibility, on top of long hours and a massive workload, is part and parcel of being a doctor.

These are realities that medical graduates need to be aware of.

UCSI University vice-chancellor Prof Datuk Dr Siti Hamisah Tapsir said medical schools need to build a curriculum that enhances the readiness of medical students to be capable housemen at the end of their studies.

“Faculty members have to ensure that students acquire information and are able to practise medicine accordingly,” she said.



Ground preparation: Siti Hamisah said medical schools need to build a curriculum that enhances the readiness of medical students to be capable housemen. - RAJA FAISAL HISHAN/The Star

Siti Hamisah, who is the chairman of the Healthcare Work Culture Improvement Task Force (HWCITF), also stressed the importance of an integrated system in the study of medicine.

This system, she said, is where students are given exposure to intensive care unit wards and the general public healthcare system while they are still studying.

“Students need to know that medicine is not just about learning science. Problem-based learning is important too.

“The real world is very different from a lecture hall.

“In some universities, students are sent to hospital wards even in their first year. At that level, however, they should only be allowed to observe (and not treat patients),” she said.

Change for the better

Siti Hamisah, who is the former higher education ministry director-general and the former science, technology and innovation ministry secretary-general, said a career in health services requires individuals who are truly committed and tenacious.

“From the outset, students must have a sense of purpose. They need to know that being a doctor is to save lives and understand suffering,” she said.

Acknowledging that the work culture of medical professionals needs to be improved, she said hospitals must create an environment where doctors and other healthcare professionals are encouraged to speak up.

“But this is not only a problem in the healthcare sector. Even in some organisations, you cannot say anything when the boss is there.

“Bosses need to create an environment where someone who speaks up is not penalised,” she said, in reference to the HWCITF Healthcare Work Culture Improvement Report 2022 (see infographics) released on Aug 17.

Another notable finding of the task force, which involved 110,411 respondents from the Health Ministry (MOH), is the need for confidential and secure channels to voice complaints and concerns on bullying and harassment.

The HWCITF, in its report, found that there were incidents of burnout, bullying and unhealthy work culture at certain health facilities under the ministry, and outlined recommendations to improve the situation, including enhancing the e-Housemen system and establishing a housemen support group.

Siti Hamisah, however, said it can sometimes be hard to determine what constitutes bullying.

“We must never normalise bullying but the term is very subjective. It’s situational and depends on the context.

“A certain act may be perceived as bullying by some but not by others. Sometimes it is about perception,” she said.

Citing what goes on in an operating theater as an example, she said voices can sometimes be raised unintentionally because of the high-pressure environment.

The HWCITF was set up by the MOH on May 13 in response to the death of a houseman attached to Penang Hospital, bullying complaints, and psychological stress faced by housemen, as well as health service staffers. The HWCITF report found no strong evidence to link the death of the 25-year-old male houseman to elements of bullying at the workplace.

The houseman was found dead, believed to have fallen from his apartment building near the hospital on April 17.

Moulding resilient doctors

Siti Hamisah hopes that the HWCITF findings will help to improve the quality of medical graduates.

“Although there is room for improvement, the medical schools in our country are world-class, and our healthcare system is one of the best globally. “I hope the report will lead to medical schools reflecting on their programmes and the support system they have in place for aspiring doctors,” she said, while stressing the need for schools to vet prospective students through a screening system before entry into medical programmes.

The HWCITF, she said, had recommended screening medical students through psychometric tests and mini interviews before entry into medical school.

Although some public universities require prospective students take an entrance test, the practice is not mandatory in all institutions, she noted.

“Sometimes students who score straight As are not necessarily suited to be medical doctors.

“They must also be compassionate and humane people,” she said.

Malaysian Medical Association president Dr Muruga Raj Rajathurai said candidates should be screened for aptitude, and not just academic credentials.

“Bring them face to face with real-life practice. Put them in a hospital for at least two weeks to see if they really want to pursue a career in medicine.

“They must understand that there is a lot of sacrifice and long hours ahead, if they choose medicine as a profession,” he said.



Vetting students: Dr Muruga Raj Rajathurai said candidates should be screened for aptitude, and not just academic credentials.

Students, said Dr Muruga, should be encouraged to branch out into other fields if clinical work is overwhelming. Research, he said, is one example of an area that really needs to be better staffed and funded in Malaysia.

Agreeing that medicine is not for everyone, Siti Hamisah said aspiring doctors need to understand the weight and responsibility of being a doctor.

Resoluteness aside, Dr Muruga said aspiring doctors must be able to learn from their mistakes.

“This can be difficult for some high performers who are not used to being told they are wrong,” he said.

Being a doctor, he added, is synonymous with lifelong learning.

“Competent medical graduates must learn what’s in the textbooks and be able to think on their feet in the wards,” he explained.

At the end of the day, being a doctor is about having a sense of duty, Dr Muruga asserted.

“There will be long and sometimes irregular hours at work and you will still need to be attentive throughout while carrying out your duties.”

THE VIEWS

What it takes...

There is no doubt that academic grades and ability are important to getting into medical school and managing the study involved.

But finding out what being a doctor actually involves and reflecting on whether that is the lifestyle you want is equally important.

We would encourage prospective students to spend some time in a healthcare setting or talk to medical practitioners about their jobs before applying to medical school.

Medical students spend a lot of time working in hospitals and clinics, and seeing what working as a doctor involves.

Even before they start full-time clinical placements, students should have the opportunity to visit a range of healthcare settings. Most medical schools will include an introduction to how health systems work and the role of the doctor in these.

However, there is still a big transition from medical school to being a junior doctor.

To prepare for this, medical schools will typically arrange for more ‘hands-on’ experience in the final year of the programme, with students taking a more active role in the healthcare teams they are assigned to or ‘shadowing’ house officers so that they are focused on what they need to know and do, to be able to manage on a day-to-day basis when they start work.”



Prof Dr Ian Martin Symonds, Dean, School of Medicine, International Medical University

Aspiring medical students should be aware of the demands of the profession: long hours, the need to adjust to a contract-based employment scheme in Malaysia, the demand for excellence at all times in patient care, and the necessity for lifelong learning.

The contract system is an area that has received unfavourable press for a long time in our country.

However, the government has made it possible for doctors who have proven themselves to remain in service to complete their specialisations through both the master's specialisation pathways offered in our public tertiary institutions, as well as the parallel pathways involving the Royal colleges in the United Kingdom.

Ultimately, all young doctors must realise that this is an increasingly competitive area and they must commit to the process. Applying for training posts in other countries is not new and competition for these places is always very tight.

Young doctors must also be ready to explore opportunities outside the traditional realm of clinical or academic medicine.

There are growing opportunities in healthcare informatics, digital health and artificial intelligence, as well as healthcare management, which also deserve attention.



Assoc Prof Dr Ganesh Ramachandran, Head, School of Medicine, Taylor's University