

## Tinnitus May 2006 - the newsletter of the NZMA Doctors-in-Training Council

The NZMA's Doctors-in-Training Council (DITC) met for the second time this year on 30 April. As usual, we heard accounts of the activities of National Office, which has been busy making submissions on things such as direct-to-consumer advertising of medications (you may have seen recent media coverage on this), and working on many other issues. The NZMSA President (Xaviour Walker) attended as usual, and reported that they remain busy with a range of issues. They have talked about trying to move on to issues other than just student debt and are looking at other matters affecting those behind us, including recruitment of Maori and Pacific Islanders to medicine and the rural curriculum.

The DITC discussed at some length the apparent lack of recognition from the Ministry of Health of serious issues in the medical workforce. This includes not just current issues for junior docs (in terms of RMO vacancies, especially of 2<sup>nd</sup> year and above house surgeons and the "locum whirlpool") but also our future careers. Those people interested in pursuing a career in General Practice must be wondering if they will be inundated with patients because no-one has planned to make sure they have colleagues. Those interested in Psychiatry can muse upon whether New Zealand-trained doctors will ever make up more than 50% of their workforce again. The examples abound. If you haven't already read it, NZMA Chairman Ross Boswell's recent editorial in Medspeak "It's the workforce, stupid" makes good reading on this point. We for one thought we could try and do something positive. We are keen to prepare a document looking at what could be done to retain junior doctors. There are some generic things that might help, and then some that are more locality- or specialty-specific, for example personal safety may be an issue particularly for emergency department staff dealing with intoxicated patients. The DITC doesn't have members from all specialties, so if anyone can help with specific ideas for their area or their specialty please email us. We are also looking to approach every trainee association we can to ask their opinions on behalf of their members. To make sure we don't miss any, if you belong to a trainee group which is represented by a body, could you please drop us an email with who they are, and how to contact them?

Obviously we are acutely aware of the current industrial situation. The DITC and NZMA have no role in these industrial matters. We agree with a number of the concerns the NZRDA has voiced about the current situation including student debt, the "locum whirlpool", shortages of RMOs, and the dangers of those 70 hour nightshift weeks. We are concerned that the DHBs seem impervious to their message that the more doctors that leave the general positions, the worse it gets for those that stay, and this situation can't continue. Our advice is to get yourself as informed as you possibly can. Read their documents, attend meetings and talk to your colleagues, as unfortunately the proverbial head in the sand approach doesn't look like it will work this year.

On a cheerier note, work is proceeding with a DITC section to the NZMA website. We are hoping to have information and links up there for you soon. DITC members will be visiting the medical school centres to do our yearly presentations on the ACE scheme along with ACE staff.

This meeting was the last with the current DITC line-up. Dr Richard Pole, who is well-known to many Otago graduates at least, due both to his appearance in many different years (due to frequent breaks for sidelines to his med degree) and on a national level, having been president of the NZMSA and a recent chair of the DITC, is off to take up a two year scholarship to Harvard very soon. Jess Allen, also an ex-president of the NZMSA, is also stepping down from the DITC at this time, to pursue the much more important job of motherhood. We are hoping to co-opt additional members shortly, to keep our representation broad until the next election.

As ever, we are keen for feedback, ideas or questions. Please email us at [ditc@nzma.org.nz](mailto:ditc@nzma.org.nz)