

Serious Charges by Hospital Doctors

DELAY IN TREATING PATIENTS ALLEGED

Statement by 12 Surgeons Criticises Government

WORKING 100-HOUR WEEK

Charges that the apathy of the Government towards the shortage of resident medical aid in the Adelaide Hospital had resulted in grave delays in treatment of patients are made in a considered statement issued today by the 12 house surgeons at the hospital, following a meeting last night.

Staff of 11 Instead of 18

THE statement, which is the unanimous opinion of the resident medical officers, says that his week the hospital staff was supplied with a list of specific cases in which it was impossible to carry out urgent treatment, as all the residents on duty were already engaged. This has caused unnecessary suffering. The doctors say that the statements of the Acting Premier (Sir George Ritchie) that the public was being adequately safeguarded could not be accepted.

They point out that it is usual for members of the resident staff to work 100 or more hours a week at considerable pressure.

It was only after long and serious consideration that the doctors decided to make public the full and exact facts of the present working of the hospital. They did so because of statements made by Ministers, and the "intolerable" conditions under which the medical staff has been working for so long. The full statement is—

"Statements about the medical staff of the Adelaide Hospital made recently in Parliament and elsewhere have so outraged those who know the hospital

Students' Help Not Solution

"THE average number of patients to be seen by each resident in the leading hospitals in Victoria and New South Wales is 30," the statement continues. "The authorities have attempted to relieve the residents of the residents of overwork by bringing students into the hospital. This appears to be a solution, but in practice it is of little use.

"Students are unable to administer anaesthetics or to perform many other duties of legally qualified men. Almost without exception students have not had enough experience to enable them to diagnose the condition of patients. They have to call a medical registrar or a house surgeon to their aid.

"In many cases, especially accidents, where inquiries or compensation claims are possible, it is essential that legally qualified men be in attendance.

"It is obvious that the employment of students, while relieving

"Make Posts More Attractive"

conditions that we, the resident medical officers, feel it is our duty to make known the facts.

"The full staff of Adelaide Hospital should be two casualty officers, five medical house surgeons, five surgical house surgeons, and six special house surgeons—a total of 18.

"At present the staff comprises—Two casualty officers, three medical house surgeons, three surgical house surgeons, and three special house surgeons—a total of 11.

"Of these 11 residents, two are on permanent casualty work. This means that nine residents have under their care approximately 550 patients. Several residents have between 70 and 80 patients, with a daily average admission of five to ten cases.

"As a result practically only new cases and very sick patients can be given the attention which is not only desirable, but in many cases essential for their wellbeing.

"During one resident's period of two months, with a certain clinic, 200 cases passed through his hands. Of these 130 were operated on, making an average admission rate of 3 1/2 a day and an operation rate of two a day.

the residents of a small percentage of routine work, leads only to duplication of the greater part of the work undertaken.

"Members of the Government have frequently stated that the honorary medical staff is helping by doing extra work during the hospital crisis. It is, however, obviously impracticable for honourees to perform the duties which usually fall to the lot of the residents.

"The residents house surgeons wish to stress that the hospital was last fully staffed early in 1933. The hospital began this year with three residents short. Within a few months two residents resigned, and even when new graduates joined the staff it was still three short. Since then four more residents have resigned.

"The departure of these residents was absent without exception due to their obtaining more remunerative positions in other hospitals.

"A year in residence is supposed to be an integral part of the medical course, during which house surgeons are expected to correlate their academic knowledge with clinical training.

"The present regime at Adelaide Hospital. Cases cannot be fully and thoroughly investigated, they cannot be followed up, and treatment cannot be given as frequently as desired."

THE statement continues—

"This week the honorary staff was supplied with a list of specific cases in which it was impossible to carry out urgent treatment, as all the residents on duty were already engaged, so causing unnecessary suffering to the patients. Hence the statements made by Sir George Ritchie that the public are being adequately treated cannot be regarded seriously.

"Hours on duty are such that it is impossible in the opinion of the resident house surgeons for them to continue to work at this pressure and maintain their health.

"A typical example of the hours on duty, all of which are spent working at top speed in ward and operating theatre is—

"Actual hours on duty—100. "Official hours spent on duty in hospital—approximately 120.

"At night every resident is on duty from midnight onwards and on numerous occasions spends considerable time in the wards.

"In moving in Parliament to questions put by members Sir George Ritchie and others have stated that as soon as the present sixth year medical students have passed their final examination the shortage will be overcome. A similar statement was made a year ago.

"In February conditions were improved for a while, but again a deplorable situation arose. Conditions are likely to remain unchanged unless the Government takes adequate steps to do so.

"The proper solution is to make Adelaide Hospital medical posts more attractive by offering a salary of at least £150 a year, with a bonus of £50 at the end of 12 months' service.

"If this be done junior resident medical officers will not leave before having served a while, but again a deplorable situation arose. Conditions are likely to remain unchanged unless the Government takes adequate steps to do so.

DOCTORS AND CABINET

(Continues from Page 1)

30 AUG. 1935 Evasive Replies Alleged

NOTHING DONE

STATEMENTS by members of Cabinet on the shortage of medical aid at the Adelaide Hospital have evoked a unanimous reply from the meeting of house surgeons last night.

"The doctors said that if the present were the first occasion on which the shortage had been discussed there would be some excuse for the attitude of the Government (for evasive replies which Ministers had made to questions by M.Ps.

"The Acting Premier (Sir George Ritchie) and the Attorney-General (Mr. Jeffries) have made broad and meaningless statements such as 'The Government will see that the hospital is properly staffed' (Hansard August 28).

"The Government has been seeing to the position' for a long time, but nothing has been done.

CRIPPLING SHORTAGE

"Mr. Jeffries has assured Mr. Richards (A.L.P., Wallaroo) that 'the Government has made broad and meaningless statements such as 'The Government will see that the hospital is properly staffed' (Hansard August 28).

"The resident medical staff wish to know what such an announcement is worth in face of the two years of crippling shortage at the hospital. Sir George Ritchie and Mr. Jeffries cannot reasonably hope by such statements to relieve the matter until they are ready to do what should have been done long ago. If they really want to satisfy the public that they have the health of the community at heart, let them act at once.

"The Ministry has also, in face of the facts, on more than one occasion tried to give the impression that the understaffing is purely temporary matter.

"I am assured by the Chief Secretary," said Mr. Jeffries (Hansard August 28), "that the Ministry are well equipped and honorable members need have no fear that under ordinary circumstances the hospital will not be adequately staffed."

POSITION "DISGRACEFUL"

"Let Sir George Ritchie and Mr. Jeffries realise that the ordinary circumstances of the hospital in the past two years have been disgraceful understaffing, and that the effect of a present epidemic was not to create the situation, but to make a difficult state of affairs intolerable.

"Also, according to Hansard," Mr. Jeffries said, "the Government will see that the hospital is properly staffed. Staffing arrangements are being made for that purpose."

"The resident medical staff wish to ask—What arrangements are being made? In whose opinion are they satisfactory? Are they satisfactory to the overworked resident staff? Are they satisfactory to the patients—citizens to whom the hospital is the only place they can go for medical treatment?"

"At the present the only arrangements that have been made are to put unqualified students into positions which they are neither capable nor legally qualified to fill.

"Mr. Jeffries replied to a question by the Leader of the Opposition (Mr. Richards): "The fact that some young doctors migrate to other States is their own business, and the Government does not intend to interfere."

WHY DOCTORS LEFT

"The Minister has failed to realise that without exception the doctors have left the State because in their opinion the salaries and conditions of their new positions are better than the salaries and overwork offered here.

"These men would have stayed in South Australia if the salaries offered to residents here had been increased. There lies the solution to the whole problem.

"There is an old argument of Sir George Ritchie which may be expected to be repeated, that young doctors owe a debt to the State as they receive their training partially at the expense of the Government.

"There is no doubt that anyone privileged to attend the University or any Government or semi-Government institution owes a debt to the State, but Sir George has never suggested that the same toll of free service should be exacted from any other profession."

DENTAL EXPERT

TO VISIT S.A. 30 AUG. 1935 Versatile Lecturer

Dr. E. W. Fish, who will arrive at Outer Harbor in the Coromina from London tomorrow,

will be invited to the Victorian Dental Board, is a most versatile lecturer, and has been invited to be the president of the Victorian Dental Board (Dr. J. P. O'Leary, who reached Adelaide today to meet Dr. Fish).

The visitor is also under sub-contract to the South Australian Dental Board, and he will lecture in Adelaide to the Victorian Dental Board, and he will lecture in Adelaide to the Victorian Dental Board, and he will lecture in Adelaide to the Victorian Dental Board. He has the distinction of being a triple doctor—dentist, physicist, and chemist.

Dr. Fish is qualified in the Dental Board of the United Kingdom, and is the author of many books on various phases of research work.

Dr. Fish will take part in the meetings of the B.M.A., of which he is a member. The purpose of his visit to Adelaide is to give a post-graduate course, and to give a lecture in English at the Victorian Board. He has the distinction of being a triple doctor—dentist, physicist, and chemist.

Dr. Fish's subjects will include certain phases of oral and mechanical dentistry and the treatment of prosthodontics. He will also give a lecture on the history of dentistry. This is the first time we have had an American lecturer. Previously we have imported American lecturers. This is the first time we have had an American lecturer. This is the first time we have had an American lecturer.



Sir G. Ritchie