

THE GREAT FEAR

There are many great fears in life. For example:

- Will we get to see the World Cup in Singapore or Johor Bahru?
- Will my wife run out of Korean dramas to watch and even more dire –
- Will there be more ERP gantries on CTE?
- Is Ricky Martin gay?

But none of the above comes close to the Great Fear. The fear begins in a very subtle way. You have a nagging feeling you are being watched. You dismiss this idea in your head. Then the signs become more obvious, like a terrible malignancy spreading its way – you are appointed to some strange-sounding committees, taskforces and focus groups that have absolutely nothing to do with real life in the battlefields of the acute hospital you work in.

Your boss calls you into the office and sits you down gently. The conversation goes like this: “You have done very well in the last few years and I am very proud of you.” He then gives this beatific smile that overflows

with equanimity and metaphysical enlightenment before uttering, “I am putting you first in line to succeed me in the hospital’s succession planning exercise. When my term ends next year, barring the unforeseen such as a Search Committee consisting entirely of morons, you will be Head.”

Of course, according to Kubler Ross, your first reaction in this moment of grief is Denial.

“Hah, Boss, in this hospital there are quite a few examples of Search Committees that consist entirely of morons!” you reply triumphantly as an unending stream of images of morons flash by your consciousness in a twinkle of an eye.

“But I think I will be on the Search Committee, and if not, I will try my best to *kelong* my friend in,” he retorts matter-of-factly.

“Look on the bright side, you get a parking lot and \$1500 more a month, and soon everyone will call you ‘Prof’. But you still don’t get to fly business class. Only the CEO, CMB and COO fly business class in this hospital,” he ends on a rueful note.

That’s when you realise after all these years that behind that veneer of genteelness, your boss may not like you that much after all.

Some of us have gone through this before and lived to tell the tale. You have quite a few options open before you. This includes:

- Slashing your wrists and jumping off a tall building (But do use a new disposable blade because you don’t want to catch some terrible blood-borne disease should you survive the fall)
- Threaten to go into private practice
- Go into private practice (please note the difference)
- Quit medicine and be a recluse like Jack Neo

But in case you think being offered the position of Head is the Great Fear, you are mistaken. Actually, the Great Fear lies on the other side of the table – the Great Fear experienced by your boss that you, the protégé, will not take the job. In which case, he has to sit there for another three years doing the meaningful work

he has been tasked to do all these years, which includes:

- Signing leave forms
- Attending division meetings
- Being shown department profit and loss accounts of which he has absolutely no control over and being told he is responsible for the department's profitability. And besides, had he been able to read financial statements, he wouldn't have become a doctor in the first place
- Approving draft replies to complaint letters that range from unreasonable to the bizarre
- Watching people like you leave for private practice

What is worse, if he cannot step down, he will face a fate worse than death, which includes the following aspects:

- He will never be considered for Emeritus Consultant
- He has to continue handling all those skeletons in the closet he has amassed over the years
- He actually has to figure out how to implement this residency business
- His face will never make the hospital wall murals as a role model

So if you are stricken with fear, it's OK. Just remember that the poor old chap facing you is probably more fearful and anxious than you. In fact, the fear of rejection is so great; he hasn't felt like this since he proposed to his wife 30 years ago. And in this hour of desperation, he is both insistent and persuasive.

"It's only for three years. After that, you can choose to not stay on as Head and step down. It's a worthwhile investment of your time to build up the department and make a difference," he intones sonorously...

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That's when you remember your boss now sounds vaguely like the guy at the Medical Faculty admissions interview 25 years ago, who like the Devil himself offered you an overseas PSC scholarship for Physics or a place in Law if you were willing to forgo your Medicine application. And that's when you realise good investment decisions come with an exit plan. But that's when you also realise you don't think Romania will grant you diplomatic immunity. So with Headship, there isn't much of an exit plan except for the following:

- You try to keel over and die in your office in which case, you exit
- There is a fire exit plan behind the office door which you face everyday without ever reading it once
- You are grooming younger doctors so that they can execute their exit plans by going into private practice
- You are your boss' exit plan
- When you grow old and less productive, your pay will be cut and you will be exited into ignominy by hospital administration (hospital administration: the faceless construct responsible for great evil in any hospital)

And that's when you conclude all too late that you really should have taken up the bloody PSC Physics scholarship 25 years

ago and become a scholar KIV politician. They have nice exit plans for scholars and politicians. But it's too late for you now and you are left with that one last desperate lunge at freedom:

- You volunteer yourself to the CEO to be Director of Medical Manpower or Quality Management
- You lie and say that you are undergoing a messy divorce
- You are depressed and you are involved with Ricky Martin at an emotional level
- All of the above

But seriously folks, there is nothing so bad about being appointed Head or Chief. Life is rewarding because at the end of the term you may be made Division Chairman and then after that, CMB. Your hospital values you. Finally, one day, you will be asked to be a member of SMC. Why, you may even be asked to work in MOH or even become DMS one day and implement policies that make a difference to patients and improve the lives of all doctors. Everyone will cheer you on and revere you. Now, who wouldn't relish the possibility of embarking on such a grand endeavour?

Life is good. Fear not. SMA