

## The elderly locum

During my 38 years in general practice, I often went to New South Wales, and I did some locum work off and on. On one occasion I worked for 4 weeks in an isolated area, relieving a doctor who needed time off in order to address his alcohol addiction. Getting registration as a medical practitioner in the state of New South Wales was easy. The experiences were enriching.

In retirement, which began when I was 60, I did locum work for periods of one day up to one month, in many parts of New Zealand. Adding them all up, they come to about thirty-five or more different practices. That is to say, 35 doctors who could take a break. I was made aware of just one complaint against me, and that arose when an incompetent nurse failed to give me an item of information.

When I was 65, a solo GP in the Hutt Valley rang me to say that he had tried all over, and that unless I could do a couple of weeks for him, he would be unable to have a summer holiday. More recently I talked to a young doctor in solo practice in an adjacent area. He told me what he was obliged to pay a locum for 1 day's work and the figure was not far short of what I used to be paid for 3 days. That's inflation, up to a point, but there is more to it than that.

Older doctors like me began to move out when re-accreditation moved in. Neither the Medical Council, having entered into an expensive unholy alliance with bpac, nor the Royal New Zealand College of General Practitioners, bent on turning doctors into angels of light and learning at a price, thought things through. Older GPs might need cataract surgery and a hearing-aid, but they do not need any more tick-a-box education. One general practitioner, himself old and desperate for relief, told me that he would hire for a short time anyone who could demonstrate his ability to hold a pen. In a group practice, one can ask another doctor for advice, there is the chemist along the street, and the practice nurse, and short-term locums almost never have to initiate a long-term treatment.

I'm long gone, and locums may be in plentiful supply, but I now have some idea what they charge, and that has to show up in the fee demanded of the patient. An older doctor might settle for less, and he'll be no better for being pumped up on bpac. However, he doesn't need the money from the job, he only wanted to get out of the house, and now that he's been bpacked off the Medical Register, he'll be off to the beach.

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