



The “Short-staffed” factor

I visit many rural hospitals now in my job – meeting with managers, medical officers, professional nurses, medical students and postgraduate students for various reasons. And I have noticed that there is a pattern that emerges, often within the first few minutes of conversation, in which the phrase “short-staffed” is mentioned by the person we have met. It is a declaration, a demand for understanding and sympathy, and sometimes it feels like an invitation to a conspiracy.

So I have started to measure the time it takes for the person to utter the phrase, in seconds, because I think that it is an important indicator - of exactly what, I am not sure, but it is definitely something significant. Some attitude of mind or approach.

The record is 4 seconds, held by a determinedly pessimistic community service officer at a hospital in Durban. He was consistently negative, everything was wrong, and he was faithfully devoted to the task of making life miserable for everyone around him. Despite a phalanx of interns, other cosmos, registrars and consultants, his fixed belief was that the hospital was desperately short-staffed, and that he was a victim of intolerable circumstances contrived by The Government to prevent him from making vast amounts of money quickly. Nothing could shake his beliefs – he was a true crusader for the downtrodden, and the public health system was his enemy.

And then, at the other end of the spectrum, are those who never mention the words at all, as if they don't exist. The most striking were the two stalwart community service doctors of the extremely remote Eastern Cape hospital, which even Bisho didn't know how to get to. They were the only doctors there since the Cubans had left a year before, blissfully untroubled by bureaucracy because the phone never worked and the roads were too bad for anyone to visit. “Short-staffed” was not in their vocabulary, or their mind-set: theirs was a different attitude. As they gleefully described, faced with

the challenge of a below-knee amputation after two unsuccessful attempts to persuade the referral hospital to do the job, they then discovered that the bone saw in the theatre pack was too blunt to make any impression on the tibia. So they stuck a Leatherman® in the autoclave, and it went through the bone “like a knife through butter”. And they had the digital photos to prove it!

I wonder what other interpretations there are for the phrase “short-staffed”. There is “short” as in abrupt or blunt, a short-staffed hospital being one that is characterized by a series of gruff, brusque exchanges, which is often not far from the truth.

Or there is the image of a short-staffed hospital filled with dwarfs in white uniforms, barely able to see over the hospital beds, the whole lot of them vertically challenged, using gymnastic skills to put up a Thomas splint.

I wonder how long it will take before someone is able to state that their rural hospital has too many staff members. A long-staffed hospital? Maybe long-suffering would be an appropriate interpretation.

Images of giraffe-like staff nurses bending down precariously to tend to their charges in hospital beds. Now I've gone too far – gone on too long – dare I say it? Not short enough.

The interpretation that I like best comes from the way that it is pronounced in KwaZulu-Natal: “Short-stuffed”.

That's what it feels like after a long day in OPD.

Next time we meet, feel free to time how long it takes me to start talking rubbish.

Steve Reid
Centre for Rural Health
University of KwaZulu-Natal