

## Doctor of the Year 2019    **Andrew Miller**



Andrew was nominated by several people in 2019. This nomination encapsulated all of the others:

I first met Andrew when he was an intern, exploring rural hospitals for a place to make a difference. Emboldened by his OT wife, Katie, and the friendship of two other couples of similar mettle, his search was not for a well-functioning place, but a hospital and community which really needed a doctor. The trio of friends settled on Madwaleni Hospital, our neighbour. At the time, there was only one doctor, a Dutch TB specialist, bravely holding her own, but barely managing. Madwaleni was at its lowest ebb for a long time. Today things are vastly different. A vibrant team of doctors, including a Family Physician, registrars and allied health professionals, provide excellent quality care. How did this happen? Of course, many people have played a part in the renaissance, but Andrew's role has been critical. I'd like to highlight four things I think deem him worthy of the Rural Doctor of the Year award.

First, his longevity. The award is not recognition of long service, but the ability to endure the tough, lean, pioneering years is a critical success factor that requires courage and resilience. It's a marker that he's in it for something other than his own salary or gratification. He truly wants to improve health care in the community he serves.

Second, his ability to connect with people. His team will tell you of his grace under pressure and ability to hear and understand where people – both his patients and his colleagues – are coming from. This is an essential skill in the small hospital environment and Andrew embodies it.

Third, his ability to ask for help. Rural care isn't a second-rate version of urban care. I always tell new doctors that an ability to work hard and to know when to ask for help, is essential to safe medical practice. This is especially true for the generalist. Andrew is not afraid to say when he doesn't know something, will readily discuss cases and has been able to reach out and ask for management or departmental-politics advice when needed. He is humble and approachable.

Fourth, his selflessness. Perhaps this is the 2018/19 story that really caught my attention. When the previous clinical manager resigned, Andrew was the obvious replacement. But by this stage, he was in a Family Medicine Registrar post and half-way through his time. It's a complicated story as anyone familiar with HR processes will appreciate, but the short version is that in order to act formally (the current status) or be appointed as clinical manager (the logical next step), he'd need to vacate the registrar post. His prayerful consideration of this came down to doing what was best for the Hospital, not himself. (The good news is that the University was flexible enough to accommodate the shift – to everyone's advantage.) Being willing to give up specialising, not

because he wasn't enjoying it, felt overwhelmed, or had changed his mind, but simply because it was the best thing for the hospital, illustrates the kind of person Andrew is.

He couldn't do what he does without the team he works with, or his wonderful, supportive wife. But I'm confident to say that Madwaleni's past six and a half years would not have been the same without him and neither would its future.

Andrew is exactly the kind of doctor I believe the Pierre Jacques award is intended to recognise and I believe he'd be a worthy recipient in 2019.