

29th July 2013

IAEM applauds superhuman efforts by Letterkenny Emergency Department staff to continue trying to function after recent hospital flood damage

The severe flood damage to Letterkenny General Hospital on the evening of 26th July 2013 has resulted in the destruction of much of the hospital infrastructure, including the newly opened block which includes the Emergency Department. The Association applauds the efforts of the duty Consultant in Emergency Medicine, Dr Gerry Lane and his medical and nursing colleagues in their efforts to provide limited services in another area of the hospital which was not damaged. The hospital's Major Emergency Plan was activated and it is to the credit of the hospital management team, the clinical staff and numerous volunteers that the disaster within the hospital was managed without adverse effects on patients. The Association also acknowledges the assistance of the adjacent Emergency Departments (Sligo Regional Hospital and Altnagelvin Hospital, Derry) who have taken many of Letterkenny's would be patients and who will have to continue to do so for a number of weeks to come. The assistance of the National Ambulance Service in bringing patients greater distances and the corresponding demands that this places on services is also acknowledged.

Although strenuous efforts are being made to provide temporary accommodation for an Emergency Department on the Letterkenny campus, it must be appreciated that for an Emergency Department to function and provide a safe service to patients, the necessary supporting infrastructure needs to be in place. Basic hospital functions such as medical records, diagnostic imaging services, laboratory services, inpatient beds, inpatient specialist teams and operating theatre capability are required. As things currently stand, it seems likely that normal services will not be restored at Letterkenny for a considerable time.

The disaster that has befallen Letterkenny is an obvious illustration of how crucial Emergency Department services are for a community but equally confirms the reality that it is not possible to provide Emergency Department services safely in isolation from the necessary supporting hospital infrastructure.

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