

9th June 2014

Emergency Department (ED) staffing facing meltdown nationally

Over the past 5 years it has become increasingly difficult to staff the country's 30 Emergency Departments (EDs) and with the imminent changeover of non-Consultant hospital doctors (NCHDs) on 14th July 2014, the position nationally is significantly worse than ever. Whereas some EDs around the country have hitherto not experienced significant difficulties recruiting staff, few if any EDs will not be short of their normal complement of junior staff come mid July.

While the Department of Health and the HSE acknowledge that there are some "challenges" with recruitment, they seem to fail to appreciate the extent of the problem and its likely implications for patients, in spite of the Association's attempts to impress on them the seriousness of the matter. In a situation where there are gaps on the normal duty roster of EDs there will inevitably be additional delays in the assessment and appropriate management of patients. Inevitably this places patients at increased risk of avoidable poor outcomes. This deteriorating position will also heap further pressure upon the remaining medical (and indeed nursing) staff in EDs.

At present, many Irish graduates are working and training abroad, particularly in Australia, in preference to working in overcrowded and poorly staffed EDs in Ireland. If this potentially lost generation of medical graduates is to be attracted back to Ireland then the underlying problems of poor levels of staffing, comparably poor terms and conditions of employment, inadequate numbers of Consultants, poor infrastructure and persistent ED overcrowding need to be rapidly addressed. Until the extent and persistence of these problems is fully recognised and acknowledged, appropriate steps will not be taken to address these issues for once and for all.

In the meantime urgent steps need to be taken to recruit more effectively and more widely around the world; shorten the period of time it takes to process applications for registration for eligible doctors from outside the EU and to effectively incentivise doctors to work in EDs if this critically important and genuinely public service is not to implode on many hospital sites around the country to the inevitable detriment of patients, their families and their communities.

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