



DAISY HILL HOSPITAL UPDATE.

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Trust Board Meeting Thursday 25th May 2023

Monaghan Row, Newry

Medical Staffing at Daisy Hill Hospital

Questions from those with Speaking Rights

Liz Kimmins, MLA, Sinn Fein

- **What efforts have been made to recruit?**

Recruiting and retaining medical staff has been a significant issue in Daisy Hill Hospital in recent years but the pressures have now escalated with a number of medical staff ending their tenure at the hospital. The regional and international shortage of consultants, difficulties recruiting specialty and associate specialist (SAS) and junior doctors and the serious over-reliance on locum doctors are matters of great concern in meeting the demand for acute medicine and providing stable medical staffing cover in our medical wards.

2019

Position	No Times Advertised this year	Successful?
Consultant General Physician (Diabetes/Endo) x 2 posts	2	No
Consultant Geriatrician	1	Yes
Consultant General Physician (Gastro)	1	Yes
Consultant Cardiologist	1	Yes

2020

Position	No Times Advertised this year	Successful?
Consultant General Physician (Respiratory)	1	Yes
Temp Consultant Respiratory	1	No
Consultant Rheumatologist	1	No
Nephrologist	1	Yes
Temporary Consultant Cardiologist	1	No

2021

Position	No Times Advertised this year	Successful?
Consultant General Physician (Respiratory)	1	No
Consultant General Physician (Diabetes/Endo)	1	No
Consultant Geriatrician	1	No
Nephrologist	1	Yes
Consultant General Physician (Gastro)	1	Yes

2022

Position	No Times Advertised this year	Successful?
Consultant General Physician (Respiratory)	2	Yes (1 filled)
Temp Consultant Diabetes	1	Yes
General Physician	1	Yes
Acute Care at Home	2	No
Consultant General Physician (Gastro)	1	No
Temp Consultant General Physician (Gastro)	1	No

2023

Position	No Times Advertised this year	Successful?
Consultant General Physician (Diabetes/Endo)	1	No – currently advertised again, interview date Sept 23
Consultant General Physician (Respiratory)	Currently advertised	- interviews scheduled for 21 st August
Consultant Anaesthetist	Currently advertised	- interviews scheduled for 28 th June
Consultant Nephrologist (Renal)	Currently advertised	- interviews scheduled for 3 rd August

- **What is being done to address the situation in DHH?**
- **What is the back up plan?**

Due to insufficient senior consultant cover at Daisy Hill and to immediately protect patient safety, all acute stroke patients are now being diverted to Craigavon Area Hospital.

Following the May Trust Board meeting where the major issues in recruitment and retention of medical staff, particularly at Daisy Hill Hospital were outlined, the Senior Leadership Team has met with other Trusts, Department of Health, Northern Ireland Ambulance Service and the Northern Ireland Medical and Dental Training Agency.

We greatly welcome the continued support of regional colleagues during this difficult time and are working with other Trusts to identify potential medical staffing support.

We now have a regionally agreed interim plan, developed with the support of our medical team which we have shared with all staff and have appointed a Chief Operating Officer for the Daisy Hill site. Ensuring patient safety, supporting our staff's psychological safety, maintaining a Type 1 24/7 Emergency Department at Daisy Hill and providing alternatives to hospital admission close to home remain our absolute priorities. Our initial focus aims to stabilise staffing for the summer months in anticipation of a more permanent solution.

We are ambitious for Daisy Hill and continue to work at pace to progress new models of care which aim to prevent and reduce inpatient medical admissions and develop more same day emergency care options.

Whilst there may be changes to the way we all work, there is a job and work for everyone and indeed many opportunities through these new, innovative ways of working.

Paediatrics, Obstetrics and Gynaecology, Mental Health and Disability services continue to operate as usual and we continue to develop our plans to build on elective surgical activity.

As always we welcome all feedback and the support of our local community and political partners as we progress our plans to stabilise services and keep patients safe.

- **Why have there been no applicants for high level job posts?**

The severe shortage of medical staff, at all levels, means that demand in the jobs market for these staff across the UK and Ireland is extremely high and doctors have greater choice in where to work and working terms and conditions. In the UK, hospital medical staff are usually trained as specialists to work in larger hospitals as part of large specialised teams with fewer rota commitments. Medicine is highly specialised and individual doctors, as a result of their training, prefer to work where there are greater volumes of their specialism with better infrastructure and support.

Deborah Yapicioz, Unison

- **Lack of engagement with Trade Unions, but even more minimal with staff. Foregone conclusion (emergency general surgery) and changes being done to us and not with us. Morale across the whole workforce is worrying low. The spirits of staff that remain, are depleted. What meaningful steps are Trust Board and management taking to stop further staff leaving and attract new staff?**

Understandably some staff at Daisy Hill and also Craigavon are anxious about the anticipated changes to our acute hospital network. A Trustwide approach, involving staff from both sites is integral to addressing our current issues and everyone's contribution is greatly welcomed.

We now have a regionally agreed interim plan, developed with the support of our medical team which we have shared with all staff and have appointed a Chief Operating Officer for the Daisy Hill site.

Whilst there may be changes to the way we all work, there is a job and work for everyone at Daisy Hill Hospital and indeed many opportunities through these new, innovative ways of working.

We anticipate intensive clinical activity through these new hyper acute services, which will require extensive staffing input and support from diagnostics, pharmacy and laboratory services. Paediatrics, Obstetrics and Gynaecology, Mental Health and Disability services continue to operate as usual and we continue to develop our plans to build on elective surgical activity.

We have met with Trade Union colleagues and have hosted a number of all staff briefings with our Senior Leadership Team who have been also directly liaising with staff in wards and departments throughout Daisy Hill.

We are very proud of the high quality care and compassion offered by our dedicated medical staff, who we know have been placed in a very vulnerable position due to the extreme circumstances in which they have been working. We thank all of our staff for their hard work in caring for our patients at this difficult time.

We continue to update through our weekly staff newsletter and as always welcome all of their feedback and suggestions as we progress our plans to stabilise services and keep patients safe.

This has been a very difficult time for all of our staff but we are encouraged by their enthusiasm to modernise and improve services for patients.

The Trust's Director of HR&OD has requested a meeting with Ms D Yapicioz to seek to understand her concerns more fully.

Noel Keenan/MaryLuckie, Save Daisy Hill Emergency Surgery Group

- **Why did senior Medical Consultants leave?**

Over the last 6 months, 6 Consultants have chosen to end their tenure with DHH. Whilst 1 consultant has retired, the main underlying reasons for resignation (or request to transfer to CAH) cited by the other consultants, are due to a number of factors. These include lack of equity of access to sub-specialist services, lack of investment in the hospital facility and services, including intensivist led HDU, access to on-site MRI, timely to access to on-site speciality opinion and equity of allocation of junior doctors. In addition, other factors cited are work life balance due to comparative workload intensity and rota commitments with other Trusts, pension taxation, and comparative remuneration packages in ROI. We are continuing to liaise with to our colleagues who are working with us to stabilise the medical provision at Daisy Hill Hospital.

The severe shortage of medical staff, at all levels, means that demand in the jobs market for these staff across the UK and Ireland is extremely high and doctors have greater choice in where to work and working terms and conditions. In the UK, hospital medical staff are usually trained as specialists to work in larger hospitals as part of large specialised teams with fewer rota commitments. Medicine is highly specialised and individual doctors, as a result of their training, prefer to work where there are greater volumes of their specialism with better infrastructure and support.

Daisy Hill Hospital is the smallest acute hospital in the UK and is currently challenged to provide the same working conditions, facilities, levels of workload / intensity as bigger hospitals.

The Chief Executive undertook, at the Trust Board meeting in May to instigate a review to more fully understand the reasons behind the level of turnover, and to identify any learning for the Trust. This review will commence imminently.

- **What is the Trust doing about the situation?**

As we continue to actively recruit for consultants, our initial focus aims to immediately stabilise staffing for the summer months in anticipation of a more permanent solution.

Following the May Trust Board meeting where the major issues in recruitment and retention of medical staff, particularly at Daisy Hill Hospital were outlined, the Senior Leadership Team has met with other Trusts, Department of Health, Northern Ireland Ambulance Service and the Northern Ireland Medical and Dental Training Agency.

We greatly welcome the continued support of regional colleagues during this difficult time and are working with other Trusts to identify potential medical staffing support.

We now have a regionally agreed interim plan, developed with the support of our medical team which we have shared with all staff. We have also appointed a Chief Operating Officer for the Daisy Hill site. Ensuring patient safety, supporting our staff's psychological safety, maintaining a Type 1 24/7 Emergency Department at Daisy Hill and implementing patient pathways that will reduce the volume of patient admissions to the hospital, improve patient flow and discharge to reduce the risk of potential harm to delayed patients, and focus on the further development of 'Home as the Hub' all remain our absolute priorities.

We remain ambitious for Daisy Hill and continue to work to progress new models of care which aim to prevent and reduce inpatient medical admissions and develop more same day emergency care options.

Whilst there may be changes to the way we all work, there is a job and work for everyone and indeed many opportunities through these new, innovative ways of working.

Paediatrics, Obstetrics and Gynaecology, Mental Health and Disability services will continue to operate as usual and we continue to develop our plans to build on elective surgical activity.

As always we welcome all feedback and the support of our local community and political partners as we progress our plans to stabilise services and keep patients safe.

Dr Donal Duffin, Daisy Hill Hospital Pathfinder Community Forum/Daisy Hill Hospital Future Group

- **Where are we now, how bad is the situation and how did we get here?**

Over the last 6 months, 6 Consultants have chosen to end their tenure with DHH. Whilst 1 consultant has retired, the main underlying reasons for resignation (or request to transfer to CAH) cited by the other consultants, are due to a number of factors. These include lack

of equity of access to sub-specialist services, lack of investment in the hospital facility and services, including intensivist led HDU, access to on-site MRI, timely to access to on-site speciality opinion and equity of allocation of junior doctors. In addition, other factors cited are work life balance due to comparative workload intensity and rota commitments with other Trusts, pension taxation, and comparative remuneration packages in ROI. It is anticipated that at least one of the staff who made a request to transfer to CAH may now opt to remain at DHH.

From 23rd July we will have two substantive consultants. Ongoing and urgent discussions are currently ongoing with NIMDTA regarding the impact of the consultant staffing on the allocation of trainees to the DHH site, and how the Trust can mitigate the risks associated with this.

This situation is not unique to Daisy Hill. The shortage of medical staff/doctors is extremely challenging, nationally, regionally and in the Southern Trust, across all of our hospitals including Craigavon Area Hospital.

Similar recruitment/retention issues are being experienced in primary care, with a number of GP surgeries facing difficulties in sustaining their practices.

This is an urgent situation, particularly as many services are delivered by a small number of consultants, putting them under much greater pressure.

- **Did the staff who left have exit interviews?**

The reasons cited by the consultant medical staff who have resigned or requested transfer to CAH, through numerous discussions with senior Trust staff, are outlined above.

It is accepted that DHH has faced an unprecedented level of turnover in the last 12 to 15 months, and in particular the last 6 months. The Chief Executive undertook, at the Trust Board meeting in May to instigate a review to more fully understand the reasons behind the level of turnover, and to identify any learning for the Trust. This review will commence imminently.

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