

The Irish Medical Workforce 2023-2024

The NDTP (national doctors training and planning) programme has published its 2023-2024 report on the Irish medical workforce. It is a detailed document, 80 pages in length. A good place to start is the last paragraph of the medical director Brian Kiron's preface where he states that 'future increases in medical consultants and training doctors must happen in tandem with a decrease in the number of non-training posts'. While Ireland has among the lowest ratio of Consultants per 100,000 of the population, it has among the highest ratio of non-training scheme doctors (NTSDs).

The publication provides the large overview, the specialty-by specialty data, and the grade-by-grade details. The big picture states that there are 873 interns, 1,966 BSTs, 2,145 higher specialist trainees, 3,970 non-scheme NCHDs, and 4,254 public hospital consultants. There is a 5% yearly growth in numbers. The increases in the intake of NCHDs over the last 5 years is as follows- interns 19%, BSTs 23%, HSTs 26%. The ratio of NCHDs to consultants per specialty ranges from radiology 0.6 to emergency medicine 3.4, the average being 2.0.

It is Government policy to provide an internship post for each CAO graduate. There are 653 direct entry and 217 graduate entry students. The gender ratio is 53% female, and 47% male, whereas in 2017 the ratio was 50/50. The average age is 25.6 years. The Department of Health has provided an additional 24 intern posts for the '23-'24 intake – 12 have a 3 month GP rotation, 6 have an academic track rotation, 6 are attached to new services at approved sites.

The BST (basic specialist training) programme consists of the early years of training after entering a specialty. The duration of BST is usually two or three years depending on the specialty. While trainees are engaged in BST, they are normally employed at SHO level. These posts are funded by the HSE and supervised by the Postgraduate Medical Training Bodies and accredited by the Irish Medical Council. It is one of the busiest periods of a trainee's career and has numerous challenges – becoming familiar with the clinical aspects of a new specialty, studying for the membership/fellowship examinations, recording clinical activities in their e-portfolios, attending the study days, and completing the mandatory courses. At their reviews what trainees most value is being supported clinically and never being placed in a situation where they are 'out-of-their-depth'. This is one of the key factors that determine whether they continue in the specialty.

The HST (higher specialist training) programme is of 5-6 years duration for most specialties. When the trainees enter HST they are more experienced and more familiar with their specialty. The numbers are increasing 6% annually. Among the current cohort, 7.1% are doing either research or working abroad. Their average age is 33 years. Each year 463 HSTs

graduate from the programme with the CSCST (certificate of satisfactory completion of specialist training). Post-CSCST fellowships are offered to some of them and the programme is being expanded. There are currently 49 places, 40 ASPIRE fellows and 9 other post-CSCST fellowships. The programme offers trainees the opportunity to undertake further training in Ireland without the need to travel abroad. It is an important initiative in the improvement of sub-specialist retention rates.

Over the last 10 years, the number of NTSDs (non- training scheme doctors), which is now 3970, has grown more rapidly than the number of doctors in training posts, 9% vs 5%. The drivers for this change are – the need to achieve EWTD compliance, the slow growth in training numbers in some specialties, the introduction of an IR agreement in Dec '21 which restricted shift duration and the number of week-ends worked, and the increase in consultants leading to a greater demand for NCHDs. The NTSD to consultant ratio ranges from emergency medicine 2.6, paediatrics 0.9, and radiology 0.1. The largest number of NTSDs are from Pakistan 30% but it noteworthy that 20% of the NTSDs graduated in Ireland.

The report provides an insight into the complexity of getting a consultant into a post. The creation of a new permanent consultant post requires approval from the CAAC (consultant applications advisory committee). The next step is to then obtain approval from the national HR, who in turn issues an LOA (letter of approval). The duration profile is the term used to describe the interval between the CAAC approval and the date of commencement in employment. The overall proportion of filled posts that are filled by 18 months is 59%. Within this figure there are discrepancies between hospital types. In the model 4 voluntary hospitals 76% of the posts are filled at 18 months, in the model 4 HSE hospitals the proportion is 46%, and the model 3 HSE hospitals it is also 46%. The significant difference between the voluntary and HSE hospitals, 76% vs 46%, is worthy of comment. A range of explanations have been offered including geography and recruitment processes. At any rate, the wait is too long for many hospital services where current demands exceed capacity.

The consultant workforce by specialty demonstrates that medicine with 1152 posts greatly exceeds all the other disciplines with – surgery 667, psychiatry 530, anaesthesia 479, pathology 336 paediatrics 280, obstetrics and gynaecology 204.

On March 2023, the new Public Only Consultants Contract 2023 was made available to all existing Consultants and offered to all new incoming consultants working in the public health service. The contract contains an exclusion on private work in public hospitals but permits consultants to work in off-site private practice. Since its launch, 30% of Consultants have now availed of the new contract, which equates to 1105 Consultants. Among the specialties, there is variation regards the uptake with Obstetrics & Gynaecology having the lowest uptake at 19% while Anaesthesiology & ICM has the highest uptake at 42%.

For Consultants over the age of 55 years, the average age at which they leave the public health service is 62 years. This is consistent with anecdotal evidence that many Consultants retire in their early-sixties. There are likely to be a range of factors other than age, including economic incentives such as pensions and debt, and workload characteristics, which influence the timing of people retiring.

The opportunities for graduating medical students to undertake post-graduate training in Ireland have been greatly expanded and continue to improve. It is recognised and accepted that high quality medical trainees are required for the delivery of an efficient and effective Irish health service.

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References:

1. Medical Workforce Analysis Report 2023-2024. HSE. National Doctors Training & Planning.