



ND+P

National Doctors Training & Planning

ANNUAL REPORT

2017



"Investing in the career development of doctors"

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Foreword

2017 was a year of significant development and improvement for National Doctors Training and Planning.

NDTP moved to new purpose-designed premises in Heuston South Quarter in June 2017. This meant the entire NDTP team is together at the same location for the first time in over a year, and that we have space to engage more fully with our key stakeholders. In the last year we've held dozens of workshops, seminars, meetings, and DIME training days in our new offices.

New developments and opportunities in education and training, from the Intern year to post-CSCST fellowships, that NDTP helped facilitate and fund this year offer genuinely new experiences and will improve the range and quality of training on offer in Ireland. The Academic Track gives 24 interns an opportunity to undertake clinical research, medical education or healthcare leadership and management as part of their intern year. The Aspire Fellowships will be integrated into the Irish health system. The Training Lead pilot project will help focus on important generic training issues within Hospital Groups and act as a central point for the recently introduced Medical Council Inspections. We appointed the first National Fellow for Innovation in July 2017 and established the Spark! Innovation Programme which was formally launch by Minister for Health, Simon Harris T.D. on 26th September 2017 as part of the Medical Careers Day in Dublin Castle.

I am glad that NDTP's Doctors Integrated Management E-System (with the new 'Consultants Module' launched this year) and International Medical Graduate Training Initiative continue to make progress, with both receiving awards.

I note the excellent work, through our education and training function, in developing new milestones in SLAs with training bodies to help secure better training and educational environments for trainees; with new milestones in place regarding pre-defined rotations, anti-bullying strategies and more support for flexible training arrangements. The launch of the Flexible Training Principles towards the end of 2017 provides the framework to enhance and promote Flexible Training to our trainees. The Medical Workforce Planning function within NDTP established its now annual conference and continue to develop a suite of specialty-specific workforce reviews.

2017 was also a year of consolidation and strengthening for NDTP in some of our existing work. The Lead NCHD programme celebrated its third birthday and expanded into Mental Health settings. New governance structures for the Intern year were implemented. We changed the Development Fund to improve applications and project impacts, and we met challenges outlined in the 'Consultant Recruitment Group' report regarding the consultant application, approval and recruitment process.

I'd like to take this opportunity to thank all NDTP staff for contributing to another year of productivity, development, and critical reflection.

Prof Frank Murray MD
Director
National Doctors Training & Planning, HSE

Contents

1	About National Doctors Training and Planning	5
2	Medical Education and Training	6
2.1	Annual Assessment of NCHD Posts	6
2.2	Funding of Intern and Postgraduate Specialist Training in Ireland	6
2.3	NDTP Key Performance Indicators	7
2.4	Developments in Postgraduate Specialist Training	7
2.5	Post-CSCST Fellowships, Scholarships, Bursaries and Funding.....	10
2.6	HSE Supernumerary Flexible Training Scheme.....	14
2.7	The Intern Year	16
2.8	Medical Careers Day.....	18
2.9	NDTP Training Lead piloted in 2017	20
3	Medical Workforce Planning	22
3.1	Publication of a Number of Medical Specialty Workforce Reviews	22
3.2	Seminars and Conferences	23
3.3	NDTP collaboration on EU Observatory on Health Systems Book	24
3.4	Engagement with Stakeholders.....	24
4	Consultants Division.....	25
4.1	Development of the Consultants Module in DIME	25
4.2	System Rollout of DIME.....	25
4.3	Consultant Applications Advisory Committee.....	26
4.4	Consultant Recruitment Group Report	27
4.5	Type C Committee	30
5	Doctors Integrated Management E- System (DIME)	31
6	Additional Areas of NDTP Activity	35
6.1	The International Medical Graduate Training Initiative (IMGTI).....	35
6.2	Development Funding 2017	37
6.3	Continuous Professional Development Support Scheme (CPD-SS).....	38
6.4	Excellence in Medical Education and Training Award	39
6.5	Strategic Plan.....	39
6.6	Medical Manpower Manager – Information Seminar.....	39
6.7	Lead NCHD Initiative.....	39
6.8	Spark! Innovation Programme	43

1 About National Doctors Training and Planning

National Doctors Training & Planning (NDTP) is a branch of the National Directorate for Human Resources within the HSE.

The main objective of NDTP is to ensure that the Irish health service is provided with the appropriate number of doctors who possess the required skills and competencies to deliver high quality care, and whose training is matched to the model of healthcare delivery in Ireland, regardless of location.

NDTP has three key domains under its remit: Medical Education and Training, Medical Workforce Planning, and the Consultant Approval Process. Another significant area of activity for the unit is the development and management of the Doctors Integrated Management Electronic – System (DIME). The data produced by DIME is fundamental to the execution of the functions of NDTP.



Pictured above: NDTP staff with some key stakeholders at the opening of the new NDTP Office

In May 2017 NDTP moved to new purpose-designed offices in Heuston South Quarter. NDTP hosted an official opening event on the 25th of August and invited all our key stakeholders to attend.

Previously the NDTP team was spread between different locations, with limited space and a lack of facilities to host meetings and events.

The offices are fully occupied and accommodate all NDTP staff and regular committees, workshops, seminars and training sessions are now hosted on site.

Pictured right:

Dr Conor Malone, NDTP Fellow for Innovation (left), Mr Pdraig Kelly, RCSI (middle), and Dr Sara McAleese, Business Manager NDTP (right).



2 Medical Education and Training

2.1 Annual Assessment of NCHD Posts

Under Part 10 of the Medical Practitioners Act (MPA 2007) the HSE is required to assess, on an annual basis, the number of intern posts, and the number and type of specialist medical training posts, required by the health service. To achieve this, NDTP recently produced its eighth annual assessment of NCHD posts (2017-18), available at <http://bit.ly/2pKGp91>.

2.2 Funding of Intern and Postgraduate Specialist Training in Ireland

The HSE has established formal, highly structured contractual arrangements with all agents providing medical education and training services, as summarised in **Table 1** below.

Table 1: Service Level Arrangements for Medical Education and Training Programmes

Co-ordinating Body	Specialist Medical Training	Continuous Professional Development Support Scheme	Internship Training
Irish Surgical Postgraduate Training Committee (RCSI)	√	√	
Faculty of Radiologists	√	√	
Irish Committee on Higher Medical Training (RCPI)	√	√	
Faculty of Paediatrics	√	√	
Faculty of Pathology	√	√	
Institute of Obstetricians & Gynaecologists	√	√	
Faculty of Public Health Medicine	√		
Faculty of Occupational Medicine	√		
College of Psychiatrists of Ireland	√	√	
College of Anaesthetists of Ireland	√	√	
Irish College of Ophthalmologists	√	√	
Irish College of General Practitioners	√		
Intern Training Network Dublin Mid-Leinster (UCD)			√
Intern Training Network South (UCC)			√
Intern Training Network West / Northwest (NUIG)			√
Intern Training Network Mid-West (UL)			√
Intern Training Network Dublin Northeast (RCSI)			√
Intern Training Network Dublin Southeast (TCD)			√

Since 2010 these arrangements have been comprehensively and formally incorporated into annual Service Level Agreements (SLAs) between the HSE and training bodies.

In 2017, NDTP oversaw the implementation of SLAs with Postgraduate Training Bodies and Intern Training Networks for the provision of training services to doctors in internship and specialist medical training, and Continuous Professional Development Support Scheme (CPD-SS) programmes for doctors who are not enrolled in a formal training programme.

2.3 NDTP Key Performance Indicators

Since 2016 the HSE directly links 8% of SLA funding for each training body to the delivery of four specifically identified milestones and outcomes. The full suite of outcomes agreed with Training Bodies is monitored throughout the year, using traffic light indicators, and formally reviewed on two occasions with each Training Body.

In 2017, a variety of outcomes were discussed and incorporated into the SLA process, such as:

- All trainees receiving notification of pre-defined rotations a minimum of 13 weeks in advance of the July intake
- Each training body to develop an anti-bullying strategy
- Fuller engagement with the Doctors Integrated Management E-System (DIME) to support workforce planning
- Incentivising training bodies to achieve higher levels of less than full time (LTFT) working arrangements for doctors

2.4 Developments in Postgraduate Specialist Training

2017 saw a number of exciting and innovative developments in Postgraduate Medical Training. Some of which are listed below.

Postgraduate Medical Training Programmes

New training programmes were introduced in Paediatric Cardiology, Neonatology, Military Medicine, Pharmaceutical Medicine and Sports and Exercise Medicine. Plans to introduce new training programmes in Pain Medicine and Intensive Care Medicine are progressing.

GP Training

Traditionally GP training has been funded, managed and delivered on a regional basis through the Primary Care Directorate and the Irish College of General Practitioners (ICGP), rather than via NDTP. The HSE and ICGP are at an advanced stage in the process to move the delivery of GP training by the ICGP through a service level agreement with NDTP - this will bring it into line with all other postgraduate specialist medical training bodies and programmes.

Postgraduate Medical Training Conference 2017: Delivering Training through Innovation

NDTP and the Forum of Irish Post Graduate Medical Training Bodies held the second Postgraduate Medical Training Conference in RCPI Dublin on 29th November 2017. The purpose of the event was to provide an opportunity for Irish Training Bodies to showcase their innovations and strategies and to share learning. The day involved a number of panel sessions which centred around the theme of training doctors for the future and technology enhanced learning. Three interactive workshops also took place throughout the day under the themes supporting doctors in difficulty, giving effective feedback to trainees, and using applied drama techniques to gain insight into the patient experience. NDTP and the Forum also used the opportunity to launch the Flexible Training Principles which were agreed by all the postgraduate training bodies.

There were over 100 attendees at the conference - participants consisted of clinicians and non-clinicians and included Postgraduate Training Body Presidents and Deanery, Chief Executives, Training Managers, Researchers, Lecturers, Hospital Group Managers, Trainees and Educationalists.



Pictured left:

Prof Ellen O’Sullivan opening the 2017 Postgraduate Conference and launching the Flexible Training Principles

Pilot Radiology Common Stem Training Year

As there is no bespoke Radiology BST programme, trainees enter Radiology HST from a range of training routes. The Faculty of Radiologists (in collaboration with their surgical and emergency medicine training partners and with the agreement of NDTP) commenced a pilot programme with the goal of providing prospective Radiology trainees with an alternative training pathway. Despite NDTP approval of 8 posts for 2017 only 1 post was filled. The faculty of Radiology reviewed the programme and decided not to continue the pilot in 2018, as the scheme has not proven popular with trainees.

Increased Basic or Streamlined Specialist Training Posts

NDTP ensure that there are an adequate number of first year training posts for graduating interns.

In July 2017, 741 first year (Basic Specialist or Streamlined) training posts were available in the Irish system, at a time when 727 doctors were completing their intern year. A total of 697 first year posts were filled in July 2017; the remaining posts were unfilled mainly due to a lack of suitable candidates or insufficient applications received.

Increased Higher Specialist Training (HST) Posts

This year witnessed another increase in the intake for Higher Specialist Training. This policy commenced in 2014 and is based on projections for consultant/GP/specialist numbers for the future.

Postgraduate medical training in Ireland is provided under the educational auspices of one of the medical postgraduate training bodies, accredited for this purpose by the Medical Council of Ireland, as listed in **Table 2**. The application and selection process for postgraduate medical training programmes is managed directly by postgraduate medical training bodies with the agreement of the HSE.

Table 2: Providers of medical training programmes

Medical Discipline	Medical Speciality	Medical Council Accredited Postgraduate Training Body
Anaesthesia	Anaesthesia	College of Anaesthetists of Ireland
Emergency Medicine	Emergency Medicine	Irish Committee for Emergency Medicine Training
General Practice	General Practice Military Medicine	Irish College of General Practitioners
Medicine	Cardiology Clinical Genetics Clinical Pharmacology Dermatology Endocrinology & Diabetes Mellitus Gastroenterology General Internal Medicine Genito-Urinary Medicine Geriatric Medicine Infectious Diseases Medical Oncology Nephrology Neurology Palliative Medicine Pharmaceutical Medicine Rehabilitation Medicine Respiratory Medicine Rheumatology Sport and exercise medicine	Irish Committee on Higher Medical Training, RCPI
Obstetrics & Gynaecology	Obstetrics & Gynaecology	Institute of Obstetrics & Gynaecology, RCPI
Occupational Medicine	Occupational Medicine	Faculty of Occupational Medicine, RCPI
Ophthalmology	Medical Ophthalmology	Irish College of Ophthalmologists
Paediatrics	Paediatrics Neonatology Paediatric Cardiology	Faculty of Paediatrics, RCPI
Pathology	Chemical Pathology Haematology Histopathology Immunology Microbiology	Faculty of Pathology, RCPI
Psychiatry	Child and Adolescent Psychiatry Adult Psychiatry	College of Psychiatrists of Ireland
Public Health Medicine	Public Health Medicine	Faculty of Public Health Medicine, RCPI
Radiology	Radiology Radiation Oncology	Faculty of Radiologists, RCSI
Surgery	Cardiothoracic Surgery General Surgery Neurosurgery Ophthalmic Surgery Otolaryngology Paediatric Surgery Plastic Surgery Trauma & Orthopaedic Surgery Urology	Royal College of Surgeons in Ireland

2.5 Post-CSCST Fellowships, Scholarships, Bursaries and Funding

This year the fourth intake of Post-CSCST Fellows took place, with the number of approved Fellowships growing to a total of 50.

Table 3 (on the following page) provides a breakdown of each approved Post-CSCST Fellowship on the NDTP register for 2017.

Aspire Fellowships

NDTP launched the new NDTP Aspire Fellowships in December 2017. The aim of the Aspire initiative is to stimulate the design and introduction of a number of high-quality, relevant and valuable fellowships (as recommended in the MacCraith report) and demonstrate the high-quality specialist training available in Ireland. The initiative is an example of a successful collaboration between the HSE's Acute Hospitals Division and NDTP.

The Aspire initiative will provide funding for 6 Fellowships. The 6 Aspire Fellows will receive:

- SpR Salary at the top point of the salary scale and headcount for the duration of the fellowship;
- Eligibility to access the Higher Specialist Training Fund during the fellowship;
- Formal recognition of achievement following completion of the fellowship from the relevant Irish Post Graduate Medical Education Body/Bodies; and,
- A high-quality fellowship experience that improves competitiveness for consultant positions in Ireland.

Supporting the development of internationally competitive fellowships may also deliver innovative research and high-value intellectual property which can be woven into the Irish health system. An expert advisory panel will assess the applications and the 6 successful July 2018 National Aspire Fellowships will be announced in February 2018.

The 2018 Aspire Fellowships were advertised to doctors that will have obtained their CSCST from an Irish Postgraduate Medical Training Body by July 2018, and will be no more than 2 years Post-CSCST on that date.

Both NDTP and the Acute Hospitals Division have invested over €250,000 in the initiative for 2018, with a commitment to fund a further 6 fellowships for July 2019. It is hoped that Aspire Fellowships will be extended into Mental Health in 2018 for the July 2019 intake.

Table 3: Approved Post CSCST Fellowships

Training Body	Fellowship	Number of fellowship posts
Royal College of Surgeons		
Surgery	Otolaryngology	1
ICEMT	Paediatric Emergency Medicine	3
Radiology	Radioisotope Imaging	1
	Breast Imaging	1
	Paediatric Radiology	1
	GI and GU Radiology	1
	Sub-Total	8
College of Psychiatrists of Ireland		
	General Adult & Old Age	4
	Old Age & General Adult	2
	General Adult & Liaison	2
	Child & Adolescent Psychiatry & Intellectual Disability of Childhood	1
	General Adult & Intellectual Disability	2
	Sub-Total	11
College of Anaesthetists		
	Intensive Care (Adult)	4
	Intensive Care (Paeds)	2
	Pain Medicine	2
	Liver Fellowship	1
	Obstetric Anaesthesia	1
	Cardiac Anaesthesia	1
	Regional Anaesthesia	2
	Airway Management & Simulation	1
	Neuro Critical Care	1
	Onco-Anaesthesia	1
	Sub-Total	16
Royal College of Physicians		
Paediatrics	Diagnostic Cardiology	1
	Infectious Disease	1
Obstetrics & Gynaecology	Advanced Gynaecological Surgery	1
	Maternal Medicine	2
	Urodynamics	1
	Labour Ward Management	1
	Gynaecology	1
ICHMT	Transplant Nephrology	1
	Stroke	1
	Transplant Microbiology	2
	Neuropathology	1
	Chemical Pathology	1
	Labour Delivery	1
	Sub-Total	15
Total		50

Dr Richard Steevens' Scholarships

The purpose of the Dr Richard Steevens' Scholarship is to facilitate doctors spending time training in centres of excellence where the required training is limited or unavailable in Ireland. The ultimate aim is to bring the skills and experience gained from the world-wide centres of excellence back to the Irish health service.

Four Scholarships are awarded annually, with funding provided for the equivalent of four SpR salaries. This is a competitive process, and candidates must demonstrate a high level of achievement in their careers to date and strong potential for the future. In the event that there is funding remaining (for example, if a successful candidate already has partial funding in place) the remaining funds are used to award a small number of bursaries.

The scholarship was developed and established by the HSE in 2007, following a recommendation in the Buttimer Report (2006). To date, 42 doctors have been awarded scholarships and a further seventeen have been awarded bursaries.

Four scholarships and three bursaries were awarded in 2017. The scholarships were awarded to the following outstanding candidates (in alphabetical order):

Dr Kah Hoong Chang, SpR in General Surgery, will undertake a fellowship in Advanced Pelvic Malignancies & Robotic Colorectal Surgery in the Royal Prince Alfred Hospital, Sydney, Australia.

Dr Niall Davis, SpR in Urology, will undertake a Fellowship in Minimally Invasive Genitourinary Tract Surgery in the Austin Hospital, Heidelberg, Melbourne, Australia.

Dr Stephen Farrell, SpR in Ophthalmic Surgery, will undertake a one year Fellowship in Paediatric Ophthalmology and Strabismus in the British Columbia Children's Hospital, University of British Columbia, Canada.

Dr Eavan McGovern, SpR in Neurology, will undertake a one year Clinical Fellowship in Transitional Care Neurology in the Brain and Spine Institute, Pitie-Salpetriere Hospital, Paris.

In addition to the prestigious Dr Richard Steevens' Scholarships NDTP also awarded three bursaries in 2017. From the rich pool of talent that applied the following three candidates were awarded a bursary (in alphabetical order):

Dr Elizabeth McElnea, SpR in Ophthalmic Surgery, will undertake a 12 months Fellowship in Ophthalmic Plastic, Orbit and Reconstructive Surgery in Macclesfield District General Hospital, Cheshire and Royal Liverpool Hospital NHS Trust and the Christie Hospital, Cheshire.

Dr Susan O'Gorman, SpR in Dermatology, will undertake a Fellowship in Cutaneous Lymphoma in the Department of Cutaneous Oncology in Guy's and St Thomas' Hospital, London.

Dr Aoife Quinn, SpR in Anaesthesia, will undertake a Clinical Fellowship in Neurocritical Care, in Addenbrooke's Hospital, Cambridge, UK.

2018 scholarships were advertised in November 2017, with successful applicants due to commence training in July 2018.

Academic GP Fellowships

The HSE, the Irish College of General Practitioners (ICGP) and the Association of University Departments of General Practice in Ireland (AUDGPI) manage the National Fellowship Programme. The National Fellowship Programme contributes to the training of academic clinicians, to the future leadership of academic general practice in Ireland and to our shared goals of best patient care.

The involvement of all three partners is a key strength in addressing the future needs of academic general practice in Ireland, and their shared commitment to the programme will ensure its sustainability. The goal of each of the partners, and the Fellows, is ultimately the best care of patients, families and communities. High-quality education, training and research in general practice is essential to understand, enhance, and maintain the ability of Irish GPs to deliver this care – but without well trained academic clinicians, these goals cannot be achieved.

There are currently two fellows on the programme - Dr Ciara Curran and Dr Muireann de Paor. Progress reports were submitted by both fellows in mid-2017 which show a significant research output, publications and international presentations.

National SpR/SR Academic Fellowship Programme

The National SpR/SR Academic Fellowship Programme (NSAFP) was established in 2009 by the HSE and the Health Research Board, with equal funding provided by both agencies. It has provided an integrated training and research pathway to achieve both a Certificate of Satisfactory Completion of Specialist Training (CSCST) and a PhD simultaneously. Uniquely, this programme has provided the opportunity to both work and undertake research abroad without a break in HSE service. To date, thirteen Fellows have participated on the programme across a broad range of specialties: Anaesthesia, Clinical Genetics, Endocrinology, Gastroenterology, General Practice, Haematology, Infectious Diseases, Nephrology, Orthopaedic Surgery and Respiratory Medicine.

Currently, there are five Fellows participating on the programme, four of whom are due to receive their CSCST in 2018 and one in 2019. No further intakes to the programme will take place as it has been replaced by the Aspire Fellowship programme.

Higher Specialist Training Fund

NDTP's Higher Specialist Training Fund is an important financial support for NCHDs on the pathway to CSCST. €500 per year is available to each Higher Specialist Trainee (years 3-8) and GP trainee (years 3-4). The fund may be used to participate in relevant approved educational events and for purchasing specialist equipment. Travel and accommodation expenses incurred while attending educational events are also covered. The fund is provided by NDTP and administered directly by the Postgraduate Medical Training Bodies.

Clinical Course and Exam Refund Scheme

Through the Clinical Course and Exam Refund Scheme NDTP continues to support the educational and professional development of NCHDs employed by the HSE. A broad range of exams and courses are refunded under the auspices of this scheme, reflecting the diversity and range and level of expertise that exists within the NCHD cohort in Ireland. Each year the list of eligible exams and courses is updated, reflecting changes in training requirements, skills and safety criteria as well as academic requirements for specialist certification. Clinical sites are funded prospectively by NDTP at the start of each year, thereby facilitating immediate payment of refunds locally to NCHDs.

In 2017, €1,695,527 was disbursed by NDTP, refunding 3889 exams/courses. This scheme is accessible to all holders of the NCHD 2010 contract, and is administered in every site where NCHDs are employed.

2.6 HSE Supernumerary Flexible Training Scheme

The medical workforce is changing and numerous reports have pointed to the importance of providing flexible working arrangements for doctors. The HSE Supernumerary Flexible Training Scheme is managed and funded by NDTP and facilitates trainees to continue their training in a flexible manner for a set period of time.

Until July 2015 the National Flexible Training Scheme was open to Higher Specialist Trainees, GP Registrars & Streamline Training Year 3 onwards. Since July 2016 the scheme has extended to include all trainees from BST Year 2/ST Year 2 onwards. Trainees must be enrolled in a BST/ST/HST Programme under the auspices of one of the postgraduate medical training bodies recognised by the Medical Council in Ireland. A summary of the number of flexible training posts occupied since 2002 appears in **Table 4**.

Table 4: Flexible Trainee numbers by Specialty (2002 -2017)

Specialty	02	03	04	05	06	07	08	09	10	11	12	13	14	15	16	17	Total
	03	04	05	06	07	08	09	10	11	12	13	14	15	16	17	18	
Anaesthesia		2	2	3	3	2	4	3	2	2		1	3	3	3	2	35
Cardiology																1	1
Dermatology		1			1		1	1	1	2	4	3	2	2	2	2	22
Emergency Med.							2	1	1	1	1	1	1	2	2	2	14
Gastroenterology		1	1	1	1	1	1				1		1				8
GIM																3	3
General Practice					2	1	1	1							1	2	8
General Surgery													1	1	1	1	4
Geriatric Medicine										1	1		1		0	1	4
Haematology	1	1										1	1	1	0		5
Histopathology		1	1	2	2	2	2	6	6	3	3	2	1	1	0	2	34
Infectious Diseases								1	1	1		1	1		0	1	6
Medical Oncology															1		1
Microbiology	1	1	1	1	1		3	3	1	1	2	2	1	2	2	2	24
Neurology					1					1			1		0		3
Obs & Gynae	3	2	2	2	2	1	3	2	1		1	1	1	2	0		23
Occupational Med.	2	2	2	2	2	1	1	1							0	1	14
Ophthalmic Surgery													1	1	2	1	5
Orthopaedics									1	1	1	1	1	2		1	8
Paediatrics	2	3	3	3	3	1			1	3	2	1	1		1	1	25
Palliative Medicine							1	2	2	1		1	1	1	1	2	12
Plastic Surgery					1	1	1							1	2	2	8
Psychiatry		1	1	1	2	1									1	2	9
C&A Psychiatry	1	1	1	1	1	1	1			1	1	2	3	5	1	1	21
Radiology								1				1	1		0	1	4
Rehabilitation Med.											1	1			0	1	3
Respiratory Med.					2									1	0		3
Rheumatology										1	1	1	1		0		4
Totals per annum	10	16	14	16	24	12	21	22	17	19	20	20	24	24	20	32	311

Flexible Training Principles

A set of flexible training principles agreed by the postgraduate training bodies and NDTP was launched at the Postgraduate Medical Training conference in November 2017.

Flexible Training options have been developed to:

- Support the retention of doctors within the medical workforce who wish to continue training on a less than full-time basis.
- Promote career development and work/life balance for doctors working within the health services.
- Ensure an appropriate balance between less than full-time arrangements, educational requirements, health service needs and quality of patient care.

Flexible Training can refer to a range of options whereby trainees can access less than full-time training or in some instances, training in geographical locations more suited to their personal circumstances while continuing to attain the required competencies and range of experience. The following principles have been agreed between HSE National Doctors Training and Planning (NDTP) and the Forum of Irish Postgraduate Medical Training Bodies (Forum).

1. All doctors in training can apply for flexible training.
2. All efforts will be made to provide flexible training to every applicant where possible.
3. Applications for flexible training can be submitted within a defined period and will normally be processed within three months.
4. No existing trainee can be disadvantaged by the application for Flexible Training options. For example, a trainee cannot have their rotation changed without their agreement to accommodate a request for reassignment from another trainee.
5. The flexible training post must meet the training requirements and be appropriate to the trainee's stage of training.
6. Flexible training should not extend the duration of training beyond the parameters laid out in the training regulations of an individual training body.
7. Flexible trainees will have their equivalent full-time salary protected and will continue to hold the NCHD contract.
8. Supernumerary Flexible training posts funded by NDTP will be administered by the training bodies from the July 2019 training year.
9. The annual allocation process should maximise the opportunities for trainees to access flexible training posts.
10. Trainees who need flexible training at short notice and /or in exceptional circumstances should have their applications dealt with on a case by case basis by individual training bodies.
11. Appeals will be processed transparently and in accordance with the policies and procedures of the individual training bodies.
12. Trainees will also have the right to an independent appeals process, but only if they have utilised the training body appeals mechanism initially.
13. Data on Flexible Training applications and approvals will be collected centrally through the Forum, shared with HSE NDTP, and be made available publicly in order to monitor progress.
14. It is expected that the number of flexible trainees will increase in the future, subject to demand. This has been incorporated into the annual Service Level Agreement process between HSE- NDTP and each individual Training Body.
15. The requirement to enhance Flexible Training options is recognised by all and in this regard, each training body will designate a named advocate for Flexible Training Options.
16. The revised arrangements for access, implementation, promotion and feedback will be reviewed on an ongoing basis by a Steering Group representing all key stakeholders.

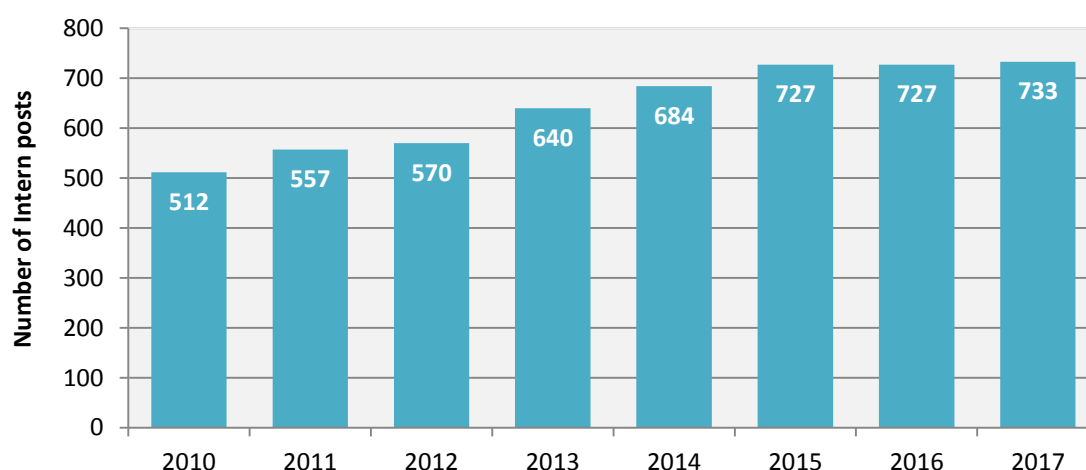
2.7 The Intern Year

The intern year provides newly-qualified medical graduates with their first experience of working as a doctor. The intern year is supported by a formal education programme, delivered by one of six Intern Training Networks, each aligned to a medical school in Ireland.

NDTP funds and arranges delivery of intern training through a Service Level Arrangement with each Medical School.

The number of intern posts available nationally is 733, which is in line with the recommendations of the Fottrell Report (2006 – entitled “Medical Education in Ireland: A New Direction”). The number of funded intern posts increased 43% since 2010, as detailed in **Figure 1**.

Figure 1: Number of intern training posts (2010-2017)



NDTP ensures that the number of posts is in line with workforce planning projections and the number of training posts available at Basic Specialist Training - the first step in Specialist Training. The main stakeholders NDTP collaborates with, in relation to the successful delivery of the intern year, are:

- Medical Council of Ireland
- Medical Schools
- Clinical sites
- Intern Training Networks
- Forum of Postgraduate Medical Training Bodies
- Health Business Services, Recruit, HSE
- Interns and final year medical students

NDTP implemented several major developments to the intern year in 2017.

New governance structures

In 2017 a new governance structure was designed and established. A Medical Intern Board provides a national governance structure for medical intern training in Ireland and also aims to initiate and facilitate the development of a centralised approach, to ensure a comparable intern training experience across all Intern Networks. The Board will also facilitate the development of a national, outcomes-based medical intern training programme which meets Medical Council standards for intern training. A Medical Intern Unit responsible for the operational function of the intern year was also established. The inaugural meeting of the Medical Intern Board took place in October 2017 and meets quarterly.

The Board consists of nine members, including an independent Chair, and has representation from the main medical education and training stakeholders.

- Chairperson
- Intern Network Coordinators – 1 nominee
- Irish Medical Schools Council – 1 nominee
- HSE NDTP – 2 nominees
- Medical Council of Ireland – 2 nominees
- Forum of Postgraduate Training Bodies – 1 nominee
- National Lead NCHD Fellow – 1 nominee
- Clinical Lead of Medical Intern Unit (in attendance)

The first appointments, including the Clinical Lead for the Medical Intern Unit Dr Gozie Offiah, were made in November and December 2017, and appointees are expected to take up their roles in early 2018.

The Academic Track

Following a proposal to NDTP by the Intern Network Executive, an Academic Track for interns was designed and piloted for the July 2017 intake. This track gives interns the opportunity to undertake a three-month project in clinical research, medical education or healthcare leadership and management.



For most interns this is the first exposure to academic work of this type. The track is facilitated through the addition of one intern post to each Intern Network (i.e. 6 posts total), meaning that 24 students can undertake one three-month academic track rotation as part of their overall internship rotations.

Pictured left: Minister of State for Higher Education, Mary Mitchell O'Connor, launches the Academic Track

As an Academic Track Intern, a trainee will receive the same experience as other interns but in addition will also have:

- Protected time during the working week to undertake a research project/participate in medical education or become involved in a quality improvement project.
- Be assigned an academic supervisor in addition to clinical supervisors. The academic supervisor will provide guidance and support in carrying out projects.
- Have access to research seminars and workshops and additional training and education.
- Have access to a research bursary for up to €2,000 to cover your research costs.
- Be required to achieve the same competencies as all other interns, and will need to complete the same mandatory elements of training in addition to the academic goals.
- Participate in an end of programme national showcase event that highlights the various outputs from the Academic Track programme.

The Academic Track will be reviewed and evaluated for the July 2018 intake. Implementation of the Academic Track would not have been possible without the successful collaboration between the Intern Network Executive, Health Business Services, Recruit, HSE, and NDTP.

NDTP has invested almost €250,000 in developing the Academic Track and hopes that it will contribute to the retention of medical graduates of Irish medical schools who have academic as well as clinical ambitions.

Future Medical Intern Unit Developments

Several changes and developments to the intern year are planned for 2018.

Firstly, the Medical Intern Unit will be fully resourced and operational by March 2018.

Secondly, the Academic Track will be piloted for a second year with the July 2018 intake. The number of Academic Track interns will remain at 24.

Thirdly, through another NDTP work stream, the national roll-out of an Intern Induction e-Portal will commence in 2018. This e-Portal aims to create a sustainable induction hub for each Intern Network that can be edited and upgraded by each Network annually.

2.8 Medical Careers Day

The Forum of Irish Postgraduate Medical Training Bodies, the Irish Medical Council and NDTP hosted the fifth Medical Careers day on Saturday 23rd September 2017 in the Printworks, Dublin Castle. The day provided practical information about postgraduate training structures in Ireland and specific information about specialty training.



After being introduced to attendees by Ms Rosarii Mannion, HSE National Director of Human Resources, and Professor Ellen O'Sullivan, Forum Chairperson, the event was opened by Minister for Health Simon Harris T.D.

Pictured left (L-R): Professor Ellen O'Sullivan (Chair of the Forum of Irish Postgraduate Medical Training Bodies), Rosarii Mannion (National Director Human Resources HSE) and Simon Harris (Minister for Health) launching Medical Careers Day 2017

Attendees met with representatives from all Postgraduate Training Bodies, the Defence Forces, Intern Networks, the Medical Council, and NDTP (including the National Lead NCHD/NDTP Fellow the NDTP Innovation Fellow) at information stands.

Pictured right (L-R): Orla Smith, Claire Lenehan, Paul Jones and Alison Drew from NDTP help facilitate Medical Careers Day 2017.



Attendees also heard presentations, including ‘The Academic Track’ delivered by Dr Patrick Mallon, ‘Leadership Skills’ delivered by Dr Catherine Diskin, and a key note presentation on ‘Effective Interview Skills’ by Ms Jo Irwin. The Co-chair of the Forum Trainee Subcommittee, Dr Maitiu O’Tuathail provided closing remarks with an engaging summation of the day.

Over 300 medical students and interns attended Medical Careers Day 2017. Feedback from almost 100 participants showed how valuable the day was:

- 99% of respondents said the day was well-organised;
- 84% of respondents agreed that the talk on effective interview skills provided useful strategies and information;
- 98% of respondents felt the Medical Careers Day was beneficial; and,
- All respondents would recommend the event to others.



Pictured left (L-R):
NDTP’s Eddie Staddon, Barbara Whiston and Yvonne McGowan along with Rosarii Mannion (National Director of HR) and John Connaghan (Deputy Director General, HSE)

Pictured right: Minister Simon Harris gets familiar with one of the Defence Forces Vehicles.



Pictured left:
Attendees networking at Medical Careers day 2017

2.9 NDTP Training Lead piloted in 2017

The Training Lead pilot took place during 2017 in two Hospital Groups - Saolta and UL.

The primary role of the Training Lead is to support the delivery of training as appropriate to each clinical site. Training Leads have a key role in coordinating training issues at clinical site level and act as a point of contact for all training related issues, particularly from an educational governance perspective and relating to external stakeholders.

Two Training Leads were appointed in the Saolta Hospital Group - Prof Michael O'Neill (who assumed responsibility for Mayo University Hospital, Sligo University Hospital and Letterkenny University Hospital) and Dr Catherine Fleming (who assumed responsibility for Galway University Hospital, Portiuncula University Hospital and Roscommon University Hospital).

Dr Catherine Nix was appointed as Training Lead for the UL Hospital Group.

The Training Lead pilot was subject to a formal review process which included two meetings of the review group, which included:

- Prof Eilis McGovern, Director NDTP - Chair
- Mr Eddie Staddon, General Manager NDTP
- Prof Ellen O'Sullivan, Chair of Forum of Irish Postgraduate Medical Training Bodies
- Dr Catherine Fleming, Training Lead Saolta
- Prof Michael O'Neill, Training Lead Saolta
- Prof Anthony O'Regan, Chief Academic Officer Saolta
- Dr Catherine Nix, Training Lead UL
- Dr Colm Henry, National Clinical Adviser Acute Hospitals

Based on the findings of the formal review process it was agreed to roll the initiative out nationally to all 7 Hospital Groups. This process commenced in December 2017 and it is envisaged that all Training Leads will be appointed in 2018.

Excellent progress has been made by the current 3 Training Leads since taking up post, below is an example of the initiatives that are happening within the Saolta Hospital Group.

Establishment of NDTP Office in Galway University Hospital (GUH)

Saolta Training Leads established an additional office on site at GUH with a specific aim to be a resource for NCHD training at GUH and PUH.

The office functions as an academic office, which works closely with the Chief Academic Office (CAO), and manages Medical Council training requirements. All NCHDs were informed about the new office's existence and how to use it as a resource to help with training queries and issues - such as accessing an employment history report from the NDTP DIME system. The office assisted the Medical Council site inspection report on trainee issues in GUH. The Training Lead office hopes to further develop the close working relationship with the CAO office, and the Royal College of Physicians of Ireland office in GUH, in 2018.

Establishment of Training Committees in Galway and Portiuncula (PUH) University Hospitals

The Training Committee in GUH was also established in 2017 and facilitates training body inspections, with a strategy for implementing quality improvement plans. The committee liaises with stakeholders and advises the CAO on issues relating to training. Membership consists of the NDTP Training Lead (Chairperson), the CAO, the Medical Manpower Manager, the Intern coordinator, representatives from each training body, the Lead NCHD and the Director of Simulation.

The Training Committee submits bi-annual reports to the CAO, which will then be submitted to the group executive. Meetings, agendas, and minutes are coordinated by the chair of the committee with administrative support from the NDTP Administrator.

A Training Committee has also been established at PUH, with the same functions and structure as the Training Committee at GUH.

There have been positive impacts as a result of the committees' inception. Site-specific issues have been identified and addressed at local level, whilst issues that are not unique to GUH have been highlighted with other training sites and the HSE. The committee has also led on the Medical Council Inspection and the response to the inspection report.

Establishment of a Trainee Sub-Committee in Galway University Hospital

A trainee committee was formed in GUH to provide a formal structure for trainee representatives to meet and discuss site-specific training issues. The committee consists of the 4 Leads NCHD (one of whom chairs the committee), NCHD Chief Resident, NCHD drugs and therapeutics committee rep and intern representatives.

The trainee committee aims to meet four times per year and reports to the GUH training committee. In 2017 the trainee committee met three times and has received positive feedback from its members. As a result of the trainee committee, progress has been made on trainee issues with the help of the NDTP Training Lead, Academic Office and Medical Manpower. Outstanding issues have been identified and solutions sought to resolve them. In 2018 the committee looks forward to welcoming new membership, as NCHD rotations take place.

Joining the Transfer of Tasks Committee

NDTP Training Lead, Dr Catherine Fleming, joined the transfer of tasks committee in GUH, to help to ensure that interns and SHOs may progress curriculum-focused training. It was identified that Electrocardiograms are not included in the transfer of tasks but place a significant workload on NCHDs and Interns. In 2018 it is hoped that through this committee the NDTP Training Lead can advocate for a cardiology technician, additional phlebotomy staff and a cannulation team.

Development of Specialty-specific Induction Booklets

2017 witnessed the first group of trainees to utilise the NDTP's new specialty-specific Induction booklets. These booklets are a useful resource for trainees who are transitioning to a new specialty - as they outline the workings and procedures of each individual specialty. Inside these booklets the specialties weekly schedule (such as ward rounds, clinics, MDT's, education and teaching) are detailed. Relevant contact details for specific specialties are also provided within the booklet.

At present, NDTP has drafted the booklet for 9 specialties and aims to have 50% of all specialties completed by July 2018 and all completed by July 2019. It is understood that some booklets may need to be revised due to changes within the departments in order to keep the booklets up to date.

Collaboration with Dr Dara Devitt, Director of Simulation

In the last year a simulation day/course on the transfer of patients was established, as suggested by Medical Registrars. GUH is a simulation hub and it is hoped that the NDTP collaboration with the Director of simulation will help further develop the Simulation Hub.

3 Medical Workforce Planning

NDTP ensures that the HSE's legislative responsibilities in medical education and training are appropriately met. These responsibilities are set out in the Health Act 2004 and the Medical Practitioners Act 2007 and include, among other things, that:

- The current and future needs of the public health service, in terms of medical training and specialist medicine workforce planning, are assessed, in order to ensure safe, quality patient care; and,
- The medical education and training system reflects, and is responsive to, the changing needs of the health service on a national and on-going basis.

Below is a synopsis of the work carried out by NDTP in 2017 to meet these medical workforce planning responsibilities.

3.1 Publication of a Number of Medical Specialty Workforce Reviews

Over the course of 2017 NDTP developed a suite of medical workforce specialty reviews, specific to medicine in Ireland.

These reviews outline the current speciality service delivery model, the configuration of the medical workforce, future drivers of change, as well as planned models of care. High-level recommendations related to future demand for the speciality, as informed by stakeholders, are also included.

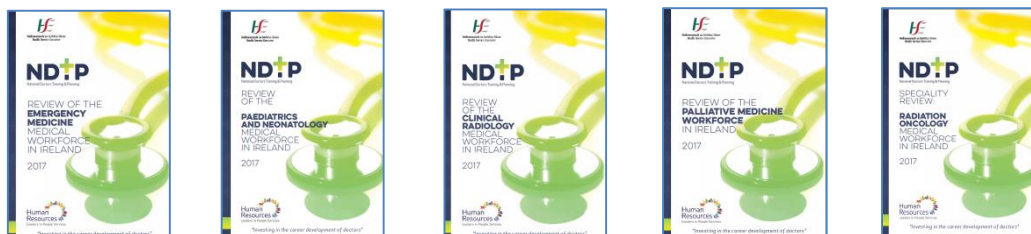
The medical workforce reviews represent an update on the original report 'Population Based Ratios of Specialists in Ireland and Internationally: An Information Source to Support Medical Workforce Planning', published by NDTP in 2014.

They are high-level and are a companion to the more in-depth specialty-specific reports which are published by NDTP (i.e. "Future Demand for General Practitioners 2015-2025", published in 2015, with equivalent reports in Paediatrics and Emergency Medicine in development).

The reviews will be a useful reference for those with an interest in data on the medical workforce and medical workforce planning, comprising a live repository that will be continuously updated as each one is completed. Where a review has yet to be completed, the chapter from the benchmarking exercise in 2014 will be available for reference.

Medical Workforce Reviews can be viewed at <https://bit.ly/2LeeVr2> for the following specialties:

- Emergency Medicine
- Palliative Medicine
- Diagnostic Radiology
- Radiation Oncology
- Paediatrics and Neonatology



NDTP will continue to publish speciality-specific Medical Workforce Reviews throughout 2018.

3.2 Seminars and Conferences

In January 2017 representatives from the medical professions, health service management and the Department of Health attended a seminar on strategic medical workforce planning held by NDTP.



Attendees were briefed on work being carried out in this area in Ireland, Britain and the Netherlands by a variety of speakers including Jasmina Behan, a leading labour economist with the Department of Public Expenditure & Reform and a member of the government advisory Expert Group on Future Skills Needs; Dutch workforce planning professional Dr Victor Slenter and Sam Gallaher, Executive Director of Skills for Health in the UK.

Pictured left:

Dr Roisin Morris (Medical Workforce Planning Manager - NDTP) opening the seminar

At the seminar, NDTP launched 'Medical Workforce Planning Ireland: A Stepwise Approach' - a simple methodology which guides the user through a series of phases to develop a strategic workforce plan for a specific or multiple groups of medical health professionals within the Irish healthcare system.

Pictured right: Dr. Victor Slenter sharing insights from Dutch workforce planning

In November NDTP co-hosted a session on doctor retention in Ireland at the Global Forum on Human Resources for Health in the RDS, Dublin. Professor Eilis McGovern (Director, NDTP) and Professor Ruairí Brugha (Head of the Department of Epidemiology and Public Health Medicine, RCSI) delivered a frank, thought-provoking and insightful presentation to a worldwide audience on challenges in retaining medical practitioners in Ireland.



Pictured left (L-R): Dr Colm Henry (National Clinical Advisor and Group Lead Acute Hospitals, HSE) and Prof Ellen O' Sullivan (Chair of the Forum of Irish Postgraduate Medical Training Bodies) enjoying the workforce planning seminar

Further work in this area continued through the last quarter of 2017 in preparing to host a seminar, focussed on how we can rise to the challenges in doctor recruitment and retention in Ireland, with presentations from local and international speakers on topics including: the links between training and retention; an effective response from a hospital to recruitment and retention challenges; findings of an EU project on recruitment and retention of doctors across Europe and Australia; and, evidence-informed best practice approaches to recruiting and retaining doctors and other health workers.

3.3 NDTP collaboration on EU Observatory on Health Systems Book

NDTP collaborated with the EU Observatory on Health Systems and Policy to produce a book on innovations in skill-mix in community settings across the EU over the course of 2017. The book is expected to be published in 2018.

3.4 Engagement with Stakeholders

NDTP continues to prioritise engagement with key stakeholders involved in medical training, workforce planning and consultant appointments in order to include their views on the future development of specialty workforces.

In 2017 NDTP dedicated a member of the medical workforce planning team with the remit of engaging with relevant stakeholders to ensure that the outputs and recommendations of medical workforce planning are fed back to those tasked with making important decisions on the number of specialists required across all specialties of medicine in Ireland in the medium to longer term.

4 Consultants Division

The core functions of the Consultants Division are to provide administrative support to the Consultant Applications Advisory Committee (CAAC) and Type C committees and to expedite the consultant application and approval process.

4.1 Development of the Consultants Module in DIME

The Doctors Integrated Management E-System (DIME) is an online system developed by NDTP to address the Human Resource Management aspects of doctors training and planning and to provide a central database of medical posts nationally. In 2017, NDTP developed the Consultants Module within DIME to improve the level and quality of information available regarding Consultant posts and Consultants employed in the Irish Health Service.

This new module of DIME, for the first time, provides a “one stop” location for information on consultant posts, consultant numbers and consultant WTE in each medical discipline, both nationally and on a Hospital Group/Community Healthcare Organisation or local clinical site basis.

This information is now used to inform medical workforce planning, medical training, consultant appointments and to ensure quality and patient safety - by identifying inappropriate registration with the Medical Council and generating a warning when a Consultant’s registration changes.

Developing the Consultant Module has been part of a wider project which includes simplifying and streamlining the application process for consultant posts and the development of an online application process for Consultant posts. The online functionality of the Consultant Application Portal module of DIME goes live in 2018.

4.2 System Rollout of DIME

In 2017 DIME was fully rolled-out to all clinical sites and locations employing consultants. The Consultants Division provided extensive support for clinical sites in order to achieve compliance with the post-matching of consultants.

NDTP convened separate meetings with representatives from those involved in HR/Medical Workforce, Mental Health, and members of the Oireachtas to discuss the consultant module. The benefits of the system to both the HSE and the stakeholders were outlined, with a particular focus on the reports available in the Consultant Module of the DIME. Feedback on DIME was very positive. Hospital Groups and Senior HR Leadership /workforce planning in Mental Health gave an undertaking to follow up with any clinical sites that had not completed their post matching. NDTP shared compliance information on a per site basis with each Hospital Group/CHO to assist with this.

The results of these efforts are:

- Information is readily accessible on consultant staffing by specialty, and on a national or a per site basis
- Recording and reporting of unapproved posts
- Enhancement of patient safety and quality due to the direct link between the system and the IMC Register - warnings triggered if a medical practitioner’s registration status changes
- Facilitation of workforce planning as the Consultant Module contains end dates for those on fixed term, specified purpose contracts and also predicted retirement dates
- Reports now available providing detail on consultant posts, consultants employed and WTE.

4.3 Consultant Applications Advisory Committee

The Consultants Division processes all applications for consideration by the Consultant Applications Advisory Committee (CAAC). The role of the CAAC is to provide independent and objective advice to the HSE on applications and qualifications required for consultant posts.

The recommendations of the CAAC are then submitted to the National Director of Human Resources and, if a post is approved, the Consultants Division issues the Letter of Approval (LOA).

The membership of the CAAC, as at 31s December 2017, was:

Independent Chair

Brian Purcell

Senior HSE officials from relevant Directorates

Dr Colm Henry - National Clinical Advisor and Group Lead Acute Hospitals
Dr Philip Dodd - National Clinical Advisor, Mental Health
Sonia Shortt – HR Director, Dublin Midlands Hospital Group
Andrew Condon - Medical Workforce Lead, Office of National Director of HR
Ms Pat O’Boyle - Assistant National Director HR, Leadership & Education
Mary Wynn - Interim Director for Nursing and Midwifery Services
Prof Eilis McGovern – Director of NDTP
Dr Marie Cox – National Cancer Control Programme

Consultant Representatives

Anaesthesia – Prof Kevin Carson, Consultant Anaesthetist, Temple Street
Emergency Medicine – Mr Fergal Hickey, Consultant in Emergency Medicine
Medicine – Prof Shane O’Neill – Consultant Physician
Pathology – Dr Peter Kelly, Consultant Histopathologist
Paediatrics - Prof Tom Clarke, Consultant Paediatrician, Rotunda Hospital
Psychiatry - Dr Mary O’Hanlon, Consultant Psychiatrist
Obstetrics & Gynaecology - Dr Sam Coulter Smith, Consultant Obstetrician & Gynaecologist
Radiology - Dr Adrian Brady, Consultant Radiologist
Surgery – Mr Michael O’Sullivan, Consultant Orthopaedic Surgeon

Academic Community Representative

Prof Michael Larvin - UL Medical School
Prof Patrick T. Murray - Irish Medical Schools Council

Patient Advocacy / Public Interest

Mr Mervyn Taylor - SAGE Support and Advocacy Service
Mr Stephen McMahan - Irish Patients Association

Voluntary Hospital representative

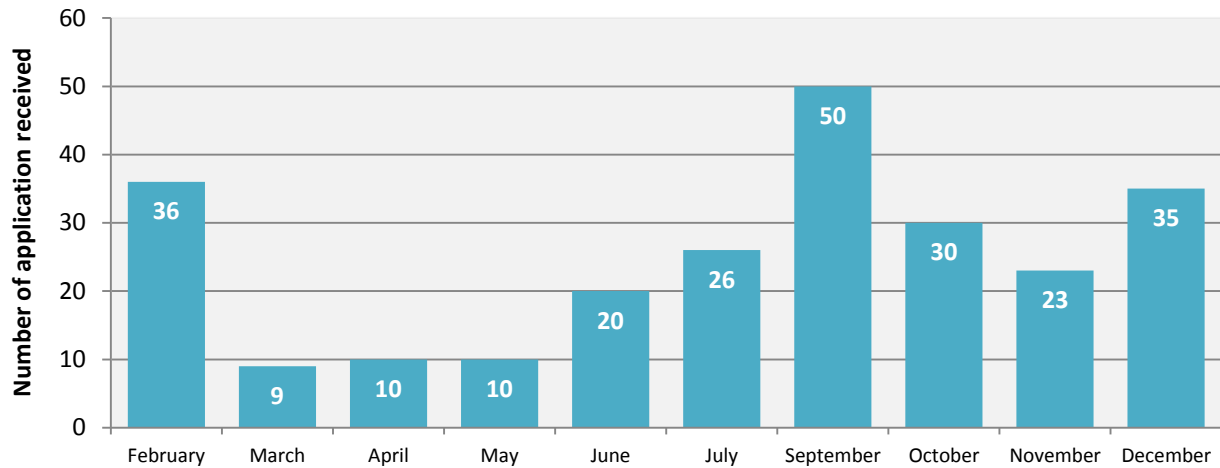
Ms Sandra Daly, CEO Mercy Hospital Cork

Two representatives from each of the Irish Hospital Consultants Association and the Irish Medical Organisation

Dr Roy Browne, Consultant Psychiatrist - IHCA
Dr Paul Browne, Consultant Haematologist - IHCA
Dr Peadar Gilligan, Consultant in Emergency Medicine - IMO
Dr Clive Kilgallen, Consultant Histopathologist – IMO

The Consultant Applications Advisory Committee (CAAC) met ten times in 2017. A total of 249 applications were considered, an average of 25 applications per meeting. The numbers of applications received by the CAAC (for each month in 2017) are highlighted in [Figure 2](#).

Figure 2: Summary of CAAC Activity in 2017



In 2017 the CAAC approved 224 applications for consultant posts, 113 were new posts and 11 were replacement or restructured posts. The remaining 25 applications were either deferred, withdrawn or incomplete.

4.4 Consultant Recruitment Group Report

The Consultant Recruitment Group Report, entitled “Towards Successful Consultant Recruitment and Retention”, chaired by Prof Frank Keane, was launched in by the HSE National Director of Human Resources in February 2017. It contained a suite of recommendations to improve the recruitment and retention of consultants in Ireland. Publication and launch of the report confirmed it as official HSE policy.

In 2017, the Consultants Division followed through on all the recommendations it was tasked with by the Consultant Recruitment Group Report, including nationwide rollout of the Consultant Module of the Doctors Integrated Management E-System (DIME), and bedding-in a new CAAC application form - as outlined in [Table 4](#).

Table 4: Consultant Recruitment Group findings and NDTP response in 2017

Consultant Recruitment Group Finding	NDTP's response
Theme: Preparation of an application for a Consultant post	
The CRG reported there were too many steps in the current processes for application, approval and recruitment of Consultant posts. Documentation associated with processes was bureaucratic and not fit for purpose.	All documentation associated with approval of a Consultant appointment is now included in a single Consultant Appointment Document pack. No applications were submitted via NDTP to the CAAC in 2017 that did not meet this format.
The Committee recommends that NDTP and National Recruitment Services (NRS) progress the development of an online application system for posts accessible to employers, regulatory and recruitment functions. This system should eliminate the multiple forms in use currently.	An enhancement to the existing DIME system was the most efficient way to progress this recommendation. Significant work was done to develop the system in 2017 between the HSE and the IT provider. The enhancement will go live in 2018.
The Committee recommends that both the 'Proposed/Approved Consultant Appointment' document and related pack explicitly provide for confirmation of funding.	This is included in the new proposed consultant appointment document. AHD have instigated a new procedure for acute hospital sites to get confirmation that funding for the post exists. NDTP does not progress applications to CAAC without this confirmation of funding.
The Committee recommends that the 'Proposed/Approved Consultant Appointment' document provide for an evaluation of current practice and workload and confirmation from the relevant nominee of the CAAC that the proposed workload was appropriate.	This is included in the new evaluation form for clinical programme leads/nominees of the CAAC. NDTP does not progress applications to CAAC without this confirmation.
The Committee noted the significant delays associated with submission of replacement posts – often in excess of 6 months and in some cases lasting years.	The national rollout of the consultant module allows reporting of projected retirement dates 10 years in advance. This allows greater preparedness for future vacancies and planning around submission to the CAAC of applications for replacement posts.
The Committee recommended that all documentation necessary to support the creation of a Consultant post is incorporated into a single set of documents and is made available to candidates as background information on the post.	NDTP has fully implemented the proposed consultant appointment document.
The Committee found information on potential Irish-trained candidates for posts to be inadequate and that it did not inform national or group planning for Consultant posts.	NDTP publish and distribute data on the output of training programmes on an annual basis in its Annual Assessment of NCHD Posts. NDTP has engaged with the PGMTB regarding use of social networks and other tools. NDTP publishes a list of all CAAC approved posts on the NDTP microsite

Consultant Recruitment Group Finding	NDTP 's response
Theme: Assessment of applications for Consultant posts	
The Committee recommends that existing Standing Orders be reviewed and agreed and the CAAC output form part of standard HSE performance reporting.	Standing orders and Membership have been reviewed. Letters were issued to non-attendees.
The Committee recommends that applications are submitted to NDTP once reviewed by the relevant Clinical Programme. A standard feedback form should be completed as part of this process for consideration by CAAC.	Evaluation form in place for all applications submitted to CAAC in 2017
The Committee recommends that CAAC: - consider and make a decision as to approve, refer for resubmission or reject an application within 8 weeks of the closing date for receipt of appropriately completed applications by NDTP - Terminate consideration of applications where no response has been received from the applicant Hospital / Mental Health Service / Agency to queries after 3 months and inform Hospital / Mental Health Service / Agency of same.	Recommendations on 8-week turnaround implemented. Review of all posts where no response after 3 months complete and deadline for response back to hospitals had been agreed upon.
Theme: The recruitment process	
The Committee found inconsistent advertisement practices associated with Consultant posts. The Committee recommends the publication of vacancies and Letters of Approval document on www.HSE.ie .	NDTP's part of this recommendation relates to publication of CAAC approved posts on the NDTP microsite and is complete.
Theme: Appointment to a Consultant post	
The Committee recommends that measures are adopted to cease the poor employment practice which gives rise to contracts of indefinite duration and risk to the public arising from provision of services by persons who are not appropriately qualified.	Through the rollout of the Consultant module NDTP have enabled the collation of data regarding the extent to which all posts nationally are filled by CIDs or by consultants holding general registration. The data has been entered by all clinical site employing consultants and is 85% complete as at 31 st December 2017. NDTP currently has no role in the other parts of this recommendation.

4.5 Type C Committee

Applications by consultants for a Type C contract, to enable off-site practice for doctors in addition to their public commitment, are also processed within the Consultants Division.

The membership of the Type C Committee, as at 31st December 2017, included:

Independent Chair

Christina Carney

Senior HSE officials

Gerry O'Dwyer, CEO, South / South West Hospital
Angela Fitzgerald, Deputy National Director, Acute Hospitals Division

Department of Health

Fionnuala Duffy, Acute Hospital Policy Unit

Public voluntary agencies

Ian Carter CEO, RCSI Hospitals Group

Patient Advocacy/Public Interest

Stephen McMahon, Irish Patients Association

One representative from each of the Irish Hospital Consultants Association and the Irish Medical Organisation

Martin Varley - IHCA

Dr Matthew Sadlier - IMO

Type C applications are submitted for review to the Acute Hospitals Directorate and, if applicable, are referred to the Type C Committee for consideration at monthly meetings. Upon recommendation for approval by the Type C Committee, the applications are then sent to the HSE Director General for final consideration.

The Type C Committee is chaired by Ms Christine Carney. NDTP acknowledges the significant contribution made by Mr Richard Bruton, General Manager, HSE HR, to the smooth running of the committee. The Type C Committee held 7 meetings in 2017 and considered a total of 34 applications for a change in contract type. 31 requests were from individuals and 3 from employers.

As in previous years, the primary reasons for seeking a change to a Type C contract were to:

- free up capacity within public facilities; and,
- help specialists refine, maintain and develop their clinical skills.

5 Doctors Integrated Management E- System (DIME)

The DIME system has been under constant development over the last three years and now includes four separate modules: NCHD Post Matching; National Employment Record (NER); Consultant Post Matching; and, Occupational Health Module. The DIME team consists of a manager and an administrator who provide support to stakeholders including Medical Manpower teams, NCHDs, Training Bodies and Occupational Health Departments. 2017 saw a number of changes in the DIME team. Aoife Nolan was appointed as the permanent DIME Manager and she was joined by Orla Smith as the permanent DIME Administrator. The team continues to be supported by Clare Doherty (ICT Projects Manager from the Office of the Chief Information Officer). As the DIME project has expanded Clare has been an invaluable support and continues to provide expert technical guidance.

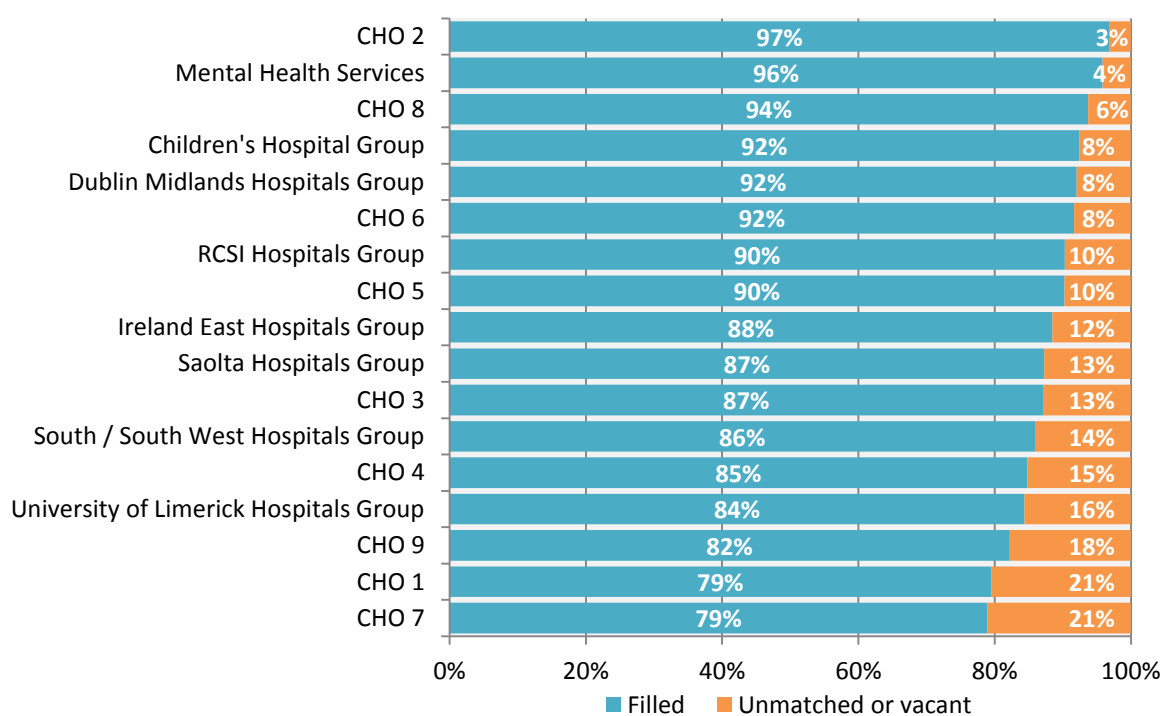
5.1 Compliance and Engagement

As functionality continues to be added to DIME, work is undertaken to ensure that engagement and compliance (from doctors, medical manpower, occupational health and post-graduate training bodies) remains high. Monthly compliance reports are sent to medical manpower users and to occupational health departments detailing progress and compliance on key areas (such as Garda Vetting recording). To support enhanced engagement with the Occupational Health Module a sub-group meets every six weeks. Members are drawn from NDTP, Workplace Health and Wellbeing, and Occupational Health users and the National Lead NCHD represents NCHDs. This group will continue to meet throughout 2018 and initiatives will continue to ensure full compliance with the module.

5.2 Consultants Module

The first quarter of 2017 saw the completion of the roll-out of the Consultant Post-Matching Module. By year end, 85% of consultant posts nationally had been fully matched. Consultant post-matching provides valuable data on the consultant workforce such as the location of our workforce, the demographics such as age and gender, permanent versus locum/temporary/agency etc. DIME also feeds into decision-making regarding workforce planning and associated activities. **Figure 3** shows that the majority of consultant posts nationally were matched at 31st December 2017.

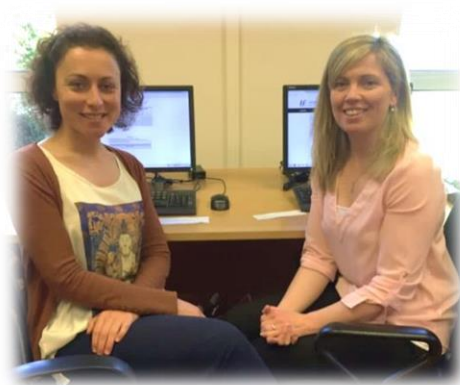
Figure 3: Consultant post-matching compliance, by Hospital Group/CHO – 31st Dec 2017



Work continues, in collaboration with the Consultants Division, to eliminate all ‘unmatched’ posts to allow more accurate reporting of consultant vacancies.

5.3 Occupational Health Module

Following on from the successful roll out of the consultant post matching module, work commenced on an Occupational Health Module.



This project was a joint initiative between NDTP, Workplace Health and Wellbeing, Office of the Chief Information Officer and Open Sky Data Systems, and it was a further step towards the MacCraith recommendation to alleviate the burden of paperwork on NCHDs as they rotate between clinical sites.

Picture left:
Attendees at an Occupational Health module training session

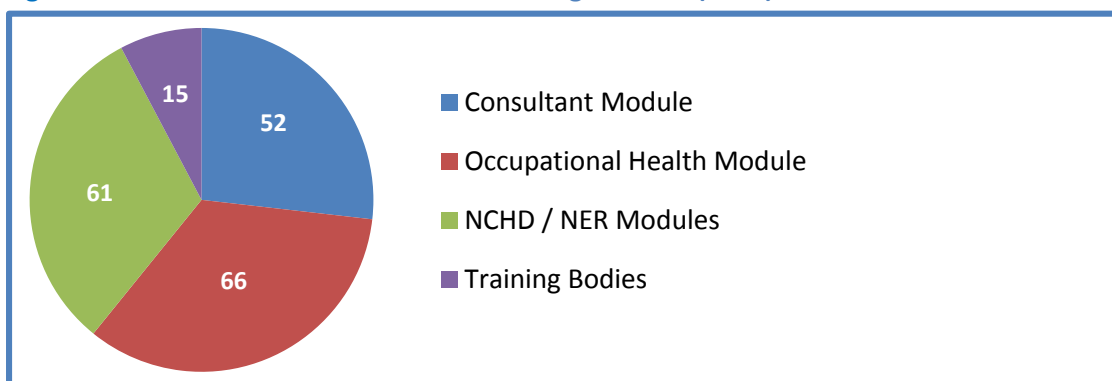
NCHDs now complete pre-employment health questionnaires through their NER account, and upload immunisation documentation directly to DIME. These documents are then screened by occupational health practitioners through a secure DIME module, and doctors are passed fit to work via DIME. Medical Manpower can view whether any NCHD currently or due to be assigned to their site are fit for or Exposure Prone Procedure (EPP) fit for employment. However, they cannot view specific forms or test results.

Doctors are considered ‘fit for work’ when they have been passed by an Occupational Health Professional and this carries through each rotation unless there is a change to their health. Managing this through DIME and ensuring that fit to work status transfers through rotations has meant a reduced work load for Occupational Health Departments and repeated screening for NCHDs.

5.4 DIME Training

2017 saw the launch of in-house DIME training. NDTP has the capacity to host up to 20 people in the boardroom in Heuston South Quarter. NDTP provided over 20 formal training sessions nationwide in 2017, delivering formal structured training to almost 200 DIME users. This is in addition to on-going 1:1 coaching and email support available from the DIME team as required.

Figure 4: Number of attendees at DIME training sessions (2017)



5.5 Development and innovation in DIME

Further updates to DIME in 2017 included:

- NER portal usability was enhanced based on feedback from users;
- Professional Competence Enrolment tracking is now available for General and Specialist Register doctors employed as NCHDs;
- Email alerts have been launched to remind NCHDs 45 days prior to the expiration of mandatory training certification;
- Search functionality has improved across all DIME modules to enhance user experience; and,
- Reporting functionality was improved to better meet user requirements.

DIME is constantly under review to ensure that existing modules reflect the needs of NCHDs and other users. Throughout 2017 work was undertaken to design the Consultant Application Portal (CAP) that will sit within DIME. This module will address key findings of the Consultant Recruitment Group (CRG) Report (Towards Successful Recruitment, 2016).

The CAP moves the Proposed / Approved Consultant Appointment document online. CAP will enable clinical sites, via Hospital Groups/CHOs, to complete, verify, submit and track Consultant post applications from initiation to CAAC approval. Extensive work was undertaken to document the workflows and identify stakeholders and key stumbling blocks in the existing process. CAP will deliver a reduction in timeframes, paper trail and errors; and, a clearer and more transparent process.

5.6 Awards and Recognition

At the February 2017 CIPD Awards the National HR Division received a Special Recognition Award. Special mention was given to the development of the National Employee Record (NER) and the work of Diversity, Equality & Inclusion and the HR People Strategy. The NER portal was recognised as an area:

“Where strong foundations and solid progress was being made in a challenging environment, with pointers towards excellence emerged as part of significant reform that should have a durable impact into the future.”



Pictured above receiving CIPD Award (L-R): Aoife Nolan (NDTP), Anna Merrigan (NDTP) Eddie Staddon (NDTP), Kathryn Thomas (CIPD Awards MC), Barbara Whiston (NDTP) and Susan Donnelly (OoCIO).

DIME will continue to develop into 2018 with a number of exciting projects planned. The Consultants Application Portal (CAP) will go live in quarter one, with all applications to CAAC due to be online by May 2018. Extensive development work will be undertaken in conjunction with the consultants' division to provide a smooth roll out and expert training.

6 Additional Areas of NDTP Activity

6.1 The International Medical Graduate Training Initiative (IMGTI)

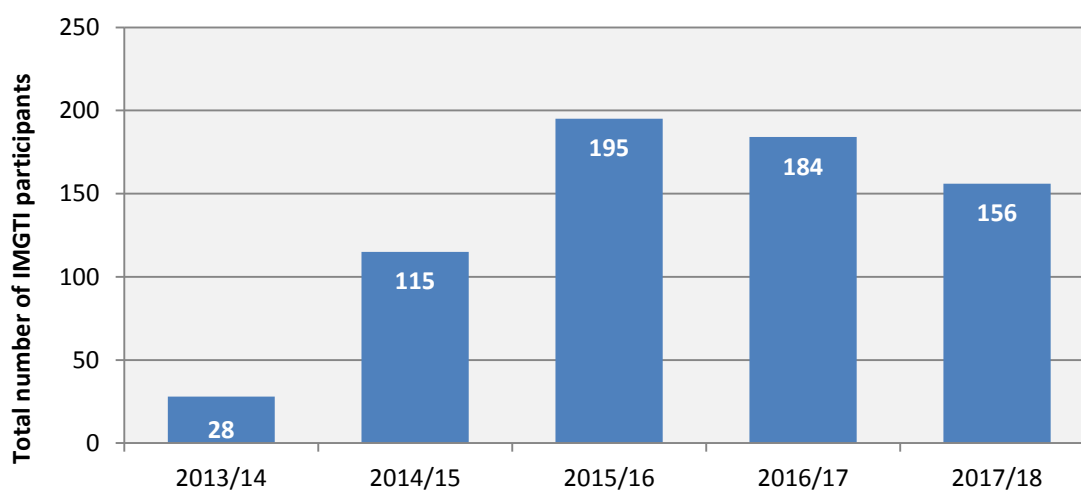
The International Medical Graduate Training Initiative enables overseas trainees to gain access to clinical experiences and training in Ireland that they cannot avail of in their own country.

The aim of IMGTI is to improve healthcare by facilitating access to a structured period of training as developed by an Irish postgraduate medical training body to meet the clinical needs of participants as defined by their home country's health service. Stakeholders both inside and outside of Ireland have succeeded in placing IMGTI on a sustainable footing by providing a mix of scholarship and fully sponsored two-year training programmes. This enhances Ireland's reputation globally as a provider of world class medical training.

IMGTI is underpinned by the World Health Organization's (WHO) Global Code of Practice on the Recruitment of International Health Personnel. The Global Code encourages developed countries, like Ireland, to attain self-sufficiency in domestic health workforce issues and to reduce reliance on foreign trained health personnel from developing countries. The Irish IMGTI Programme has received international acclaim as best practice in implementation of the WHO Global Code and has been used in promotional material by the WHO to this effect.

Each year the IMGTI alumni network grows and over 300 doctors have participated since its launch in 2013.

Figure 5: International Medical Graduate Training Initiative's annual intake (2013-2017)



Some doctors are selected to join IMGTI on a scholarship basis and others are fully sponsored by their own governments.

IMGTI is managed and governed by a committee of representatives from NDTP and the Forum of Irish Postgraduate Training Bodies in Ireland. Implementation of IMGTI requires working with a wide range of stakeholders for the mutual benefit of the Irish and international health services. National and international key stakeholders who ensure the ongoing success of the programme are: HSE-NDTP, Irish Postgraduate Medical Training Bodies, the Overseas Educational Partner/ Sponsoring State, the Irish Medical Council, the Department of Jobs, Enterprise and Employment (DJEI), and the Irish Naturalisation and Immigration Service (INIS). The majority of programme participants are from Pakistan, along with a range of other countries including Sudan, Kuwait, Saudi Arabia, UAE and Bahrain.



Pictured left:

Delegates from the College of Physicians and Surgeons Pakistan (CPSP) together with representatives from the Forum of Postgraduate Training Bodies.

Each cohort of trainees enhances their own learning in the Irish healthcare system in the short-term, and in the medium and long-term improve global health services by transferring back the skills and experience gained in Ireland in the specialties of Anaesthesia, Medicine, Surgery, Radiology, Pathology, Obstetrics and Gynaecology, Paediatrics, Ophthalmology and Emergency Medicine.

Trainees receive full access to specialty-specific courses, study days, assessments and clinically accredited supervisors while in Ireland in turn providing opportunities to excel in their specialty and acquire proficiency in techniques. Trainees become an integral member of their Hospital clinical team treating our patients, often in hospitals which have found it more difficult to attract and recruit doctors in training.

Visit of the College of Physicians and Surgeons Pakistan to Ireland

The HSE and the Forum of Postgraduate Medical Training Bodies were delighted to welcome a high-ranking delegation from the College of Physicians and Surgeons Pakistan (CPSP) to Ireland for a Steering Group Meeting in October 2017.

The meeting was told that 58 CPSP trainees were in post by 10 July 2017 with all trainees in post by 23 July 2017. First year trainees were spread across 21 accredited training sites. IMGTI trainees all received induction in Ireland and CPSP confirmed that they too hosted induction briefing classes to the cohort, regionally, before travelling to Ireland. It was noted that the process of induction of trainees is improving each year. Prof Gondal (CPSP) said that 68 trainees (out of 69) returned to Pakistan from the cohort 2015-2017.

Each of the Irish Clinical Leads updated the Group on the performance of the current trainees. Feedback was very positive across all specialties with all satisfied on trainees' performance to date. Prof Asghar Butt also endorsed the positive feedback received from the trainees.

Prof Gondal presented the findings of a survey of CPSP trainees who completed the 2 year programme. At that time, 287 trainees had availed of the programme. This on-going qualitative study reported that trainees gained professionalism, ethics, financial security and opportunities to participate in European conferences/courses. Trainees learned to adopt a systematic approach to patient care, evidence based decision making and gained ample experience.

We look forward to future visits to Ireland from CPSP.

Winner of Irish Healthcare Awards 2017

IMGTI was a winner of an Irish Healthcare Award in 2017 in the category of Best Sustainable Healthcare Initiative.

This is recognition of all the work put into the programme by national and international stakeholders, as well as acknowledging the contribution made to local and global health systems by these doctors in training.

Pictured right: IMGTI representatives accepting the Irish Healthcare Award.



Key impact of IMGTI in 2017

Graduates of the IMGTI programme make a positive impact on global health services as a result of their training in Ireland. Through their training IMGTI enhances evidence-based decision-making skills, with trainees citing benefits such as: "exposure to a much more developed healthcare system" and "Exposure to equipment, drugs and techniques which we only read in books".

Those who have completed their training and returned home are establishing themselves in the forefront of service development in their local hospitals and communities, setting up new services in areas such as Anaesthesia, Ophthalmology, Rheumatology, Infectious Diseases, Gastroenterology, Obstetrics & Gynaecology, Paediatrics, and Histopathology. We are confident of many more progressive achievements in the global health sphere as IMGTI alumni numbers from all specialties increase annually, transferring the knowledge and skills honed in Ireland to countries around the world.

6.2 Development Funding 2017

The Development Funding stream of NDTP provides financial support, outside of an SLA, to develop postgraduate medical education and training in Ireland. Proposals are invited from postgraduate medical training bodies and intern networks on an annual basis for projects, or initiatives, that will enhance the education and training experience of doctors in Ireland.

For the 2017-2018 Development Funding cycle, a new application form was developed incorporating a logical framework approach. This approach required applicants to present their project ideas in a different way than had been asked in previous funding cycles, with a focus on mapping the goal, purpose, outputs and activities of the project and thinking about how to evaluate the project's successes.

A workshop was held in July 2017, facilitated by NDTP's Simon O'Hare, to illustrate to applicants how the new form should be completed. The workshop also encouraged and facilitated collaboration among applicants, a theme that we intend to continue for the 2018-2019 funding cycle. In 2017, 34 proposals were submitted for Development Funding. Following an internal and external review process, 17 of these were awarded funding, amounting to approximately €1M. The awarded projects range from a joint project by the RCPI and RCSI to address bullying and inappropriate behaviour, to the national roll out of an induction e-portal for interns.

The induction e-portal for interns was a Development Funding project awarded to NUIG in 2015, which was then submitted and awarded in 2017 for a national roll-out. The progression of this idea from implementation in one Intern Training Network to a national roll-out is the essence of what Development Funding aims to achieve.

Further highlights from 2017 were the nomination of several Development Funded projects for Irish Healthcare Awards. The nominated projects included:

- ICGP: Tools for Recognition of Prior Learning (funded 2016-2017); and,
- College of Anaesthetists: Mobile application with a web-based platform to support competency-based feedback and assessment in clinical sites (funded 2016-2017).

The delivery of surgical equipment to the training suite of the RCSI's new Academic and Education Centre was also a highlight of the year. This equipment will be available for all training bodies to benefit from. Development Funding will focus on collaboration between applicants for the 2018-2019 funding cycle. We intend to facilitate several workshops in order to create the environment for training bodies and the intern training networks to come together and share ideas. NDTP also intends to host an awards ceremony in June 2018 in order to showcase some of the excellent and innovative initiatives that are being carried out across all of the work streams we have a responsibility for. As part of this ceremony, we will display posters of several of the Development Funding projects that were completed in the 2017-2018 funding cycle. This will likely become an annual event for NDTP and so, for Development Funding.

6.3 Continuous Professional Development Support Scheme (CPD-SS)

The Continuous Professional Development Support Scheme (CPD-SS) was introduced in July 2015 to replace the Professional Development Programme (PDP) which had been in existence for the preceding four years.

CPD-SS is based on valuable feedback received from NCHDs, through an on-line survey and focus groups. The scheme is funded by NDTP to facilitate NCHDs who are not in training posts to continue to maintain and enhance their clinical knowledge and skills and also to maintain their professional competence in line with Medical Council requirements.

CPD-SS has a number of features:

- Eligible NCHDs are permitted to undertake training and educational activities with any Irish Training Body and are no longer restricted to courses provided by the training body with whom they register;
- Once enrolled, NCHDs can access training and educational activities worth up to 20 external CPD credits or totalling three days per year, whichever is greatest, fully funded by NDTP;
- A prospectus of CPD-SS courses and activities for NCHDS is available at <http://bit.ly/2q73UfK>; and,
- Enrolment for the CPD-SS is free of charge for eligible NCHDs.

The CPD-SS is subject to on-going review by NDTP to ensure that it is delivering the opportunities required by the relevant NCHD cohort to meet the requirement of PCS and ensure value for money.

6.4 Excellence in Medical Education and Training Award

NDTP launched the Excellence in Medical Education and Training Award in 2017 which offers a unique opportunity for NDTP to recognise and celebrate the excellence that exists within our Post-Graduate Medical Education and Training Bodies and Intern Networks.

Applications are invited from training bodies/faculties and intern networks that have successfully implemented an initiative that has had a proven benefit to trainees.

The winning application will receive the Award for Excellence in Medical Education and Training comprising up to €25,000, and two commendations with awards of €5,000 each will also be presented at the NDTP Excellence Awards on Thursday June 28th 2018.

6.5 Strategic Plan

NDTP continues to implement the core objectives of the strategic plan 2016 – 2020. Many of the initiatives and events described in this report are directly attributable to the strategic plan. A formal review of the plan took place in March 2017.

6.6 Medical Manpower Manager – Information Seminar

With NDTP's Strategic Plan's objective of increasing stakeholder engagement in mind, NDTP hosted an information day for the National Medical Manpower Manager (MMM) Forum in October 2017.

All MMMs were invited and 30 attended the event, which was hosted in the new NDTP offices in Heuston South Quarter. The day included a welcome and introduction to NDTP by Prof Eilis McGovern (Director), an update on the new on-line consultant application module from Barbara Whiston (Business Manager), a DIME presentation from Eddie Staddon (General Manager), a Medical Workforce Planning presentation from Roisin Morris (MWFP Manager) and Simon O'Hare (MWFP Officer). Presentations were also provided from Dr Conor Malone (NDTP Innovation Fellow) and Dr Louise Hendrick (National Lead NCHD/NDTP Fellow).

Feedback on the event was positive, NDTP intends to hold a similar event for Medical Manpower Managers in early 2018.

6.7 Lead NCHD Initiative

In 2017, the Lead NCHD programme celebrated its third birthday with Dr Catherine Diskin, National Lead NCHD 2016-2017 and Dr Louise Hendrick, National Lead NCHD 2017- 2018 delighted with its success.

The Lead NCHD initiative continues to expand and to-date over 200 NCHDs have occupied the role. The Lead NCHD role promotes NCHD engagement, communication and leadership. It continues to thrive and develop relationships within the Irish health service to promote NCHD engagement. The programme has many key supporters including Minister Simon Harris T.D. who met with a delegation in March and June 2017.

National Lead NCHD/NDTP Fellow

Following a successful launch of the fellowship, with the appointment of Dr Catherine Diskin in 2016, the fellowship was continued, with the appointment of Dr Louise Hendrick, in July 2017.



Pictured above: NCHDs attending a Lead NCHD Workshop at Dr Steevens’ Hospital, along with senior leaders from HSE

Key pillars of work included supporting the Lead NCHD programme, direct engagement with NCHDs, development of new communication channels and supporting NCHD engagement whilst representing the NCHD voice at various fora. Examples include both National Lead NCHDs contributions to the “Deteriorating Patient Recognition and Response Improvement Programme”, the development of Standards for “Health and Wellbeing of Doctors” (which are to be published in 2018), and exploring costs associated with being a NCHD in conjunction with the RCSI.



Pictured left (L-R):

Dr Catherine Diskin, National Lead NCHD 2017, Dr Anna McHugh Lead NCHD 2017, and Dr Louise Hendrick, National Lead NCHD 2018

The National Lead NCHD joined the MacCraith Implementation Group in 2017 and began working with the Programme for Health Services Improvement on report recommendations.

This work at a national level is reflective of the work being done at a local level by Lead NCHDs - represented by a variety of events and initiatives including Eid celebrations in Galway, led by Dr Syeda Amna Azim; a multicultural night in Portlaoise, led by Dr John Brazil, to a staff engagement project at

Mercy University Hospital Cork, led by Dr Mortimer O' Connor. The success of the Lead NCHD programme in terms of its broadest impact, felt by NCHDs is at a hospital and departmental level. We acknowledge the support of Clinical Directors, members of hospital management, Consultant and NCHD colleagues and ask that it may continue.

Expansion of the Lead NCHD initiative

During 2017, the Lead NCHD initiative successfully expanded into Mental Health settings. This expansion was embraced by the Royal College of Psychiatry along with National Clinical Advisor & Group Lead, Dr Margo Wrigley and her successor Dr Philip Dodd. Additionally, preparations were made for planned expansion into Public Health and General Practice.



Pictured above: Juanita Guidera, Lead for Staff Engagement (Quality Improvement Division), explores what QI means with Lead NCHDs

Lead NCHD Awards

The annual Lead NCHD Awards were launched in 2016 to acknowledge the work undertaken by Lead NCHDs during their tenure. Over 30 projects have been submitted for consideration for the 2017 awards. Lead NCHDs were invited to submit initiatives that they implemented on their clinical site, in the following categories:

- Enhanced communication between NCHDs and other colleagues;
- Local NCHD education/training;
- Policy/process development;
- Quality improvement initiative; and,
- Patient centred initiative.

The Awards were presented in September 2017 and the winning entry was submitted by Dr Mortimer O'Connor (Mercy Hospital) who ran a 'valuing voices' initiative with listening workshops followed up by several initiatives to improve the NCHD experience further. Runners up were Dr Louise Hendrick for an initiative on 'medication safety reporting' and Dr Anna McHugh for 'Occasional Acts of Kindness' initiative on beating burnout and promoting staff engagement.

Developing leadership capacity within NCHDs

In 2017 four workshops were held with Lead NCHDs. The workshops focussed on developing leadership skills; promoting teamwork; and, engaging with health service senior management. This was complemented with guest speakers from outside healthcare - including Ms Sinead Burke, writer and PhD candidate at Trinity College Dublin, and Mr Alex Wright, Irish Olympian. All Lead NCHDs are invited to participate in four dedicated Lead NCHD workshops with an emphasis on developing individuals understanding of the health service along with supporting local projects.

Eleven Lead NCHDs were funded by NDTP to attend the Leaders in Healthcare conference in Liverpool, organised by the Faculty of Medical Leadership and Management. Over the three days, leads attended talks and interactive sessions on leadership, resilience, innovation amongst others. Additionally, they had the opportunity to speak with international colleagues around potential development of doctor leadership roles and learn from international experience.



Pictured above (L-R) –

Attendees at the Leaders in Healthcare Conference: Dr Peter O'Reilly, Dr Jack Collins, Dr Louise Hendrick, Dr Laura Fahey, Dr Keneilwe Malomo, Dr Danielle McCollum, Dr Margaret Gallagher, Dr Joy Tan, Dr Maitiu O'Tuahaill, and, Dr Lylas Aljohmani (absent from photo Dr Muhammad Siddique)

In 2017 there was a concerted effort to expand opportunities for leadership development for NCHDs. The NDTP Leadership and Management Scholarship programme saw NDTP commitment to 24 part-funded scholarships for Masters in Management and/or Leadership. Additionally, a number of NCHDs are also enrolled in the HSE's leadership academy, reflecting a demand and desire for increased involvement in management/leadership on the part of clinicians. The Lead NCHD programme also supported early engagement with leadership, hosting an 'Early Leaders' workshop in March 2017 to foster curiosity in those who may be interested in becoming a Lead NCHD in the future. Attended by interns and SHOs, guest speakers included Front line ownership experts Dr Michael Gardam and Ms Leah Glitterman of Toronto and Ms Juanita Guidera, Quality Improvement Lead for Staff Engagement.

NCHD Involvement within the Irish Health Service

NCHD involvement has expanded within the health sector. NCHDs now participate in the staff engagement forum, attend the Joint HSE/Forum of Irish Postgraduate Medical Training Bodies quarterly meeting whilst providing feedback to the various hospital divisions on relevant topics, for example Early Warning Score systems (EWS) and developments in E-health. NCHDs were also involved in the New Children's Hospital programme workstreams; the criteria led discharge programme and the flu vaccine campaign.

Encouraging NCHD Innovation

Neurotransmitter involved collaboration between the National Lead NCHD programme, the Irish centre for applied patient safety and simulation at the National University of Ireland and the Saolta Hospital Group, and explored supporting health care worker innovation. Project sponsors included the national digital research centre, Bioinnovate and the Portershed, Galway. Participants applied with early stage projects and were provided with tailored mentoring. The winner was Dr Dylan Finnerty, Specialist Registrar in Anaesthesia.

The success of Neurotransmitter demonstrated that supporting innovation at the frontline is complimentary to facilitating staff engagement and that an appetite exists for it within our health service. From this, the Spark programme and development of a Fellow in Innovation was the natural next step.

6.8 Spark! Innovation Programme

NDTP was delighted to establish and fund the Spark! Innovation Programme in July 2017 with the appointment of Dr Conor Malone, an ophthalmology trainee, as National Fellow for Innovation.

The Spark! Innovation Programme is a national NCHD-led programme to encourage, support and recognise innovation among doctors in Ireland.

Spark! was launched on 26th September 2017 at the Medical Careers Day in Dublin Castle. Minister Simon Harris T.D. gave his support to Spark! in his opening speech of the day, welcoming a new stream of innovation in the HSE. Dozens of medical students and interns visited the Spark! stand to learn more and to get involved, including launching the #NCHD2040 campaign.



Pictured above (L-R): National Fellow for Innovation Dr Conor Malone enjoys support from fellow bright sparks! Rosarii Mannion, Simon Harris, Professor Ellen O'Sullivan and Dr Louise Hendrick

Multiple strands comprise the Spark! Innovation Programme:

Spark Curiosity

In November 2017, Spark Curiosity arrived in Cork. Hosted by Tyndall National Institute, we welcomed UCD graduate Dr Marc Ó Gríofa to share his experiences working with NASA, training US Navy SEALs, advising medical device companies, and forging an unconventional medical career. The audience of medical students and NCHDs took part in a seminar discussing their ideas for innovative ways to tackle problems in medicine, from communication in hospitals to delivering training to staff in remote regions.

Spark Debate

In December 2017, the first Spark Debate was held at University Hospital Limerick (UHL). The motion was “This House Would Stop Funding Space Medicine”. UHL Consultant Ophthalmic Surgeon, Ms Marie Hickey-Dwyer moderated the debate, which featured NCHDs Dr Paul O'Hara and Dr Shane O'Regan, along with Limerick CEOs Martina Skelly of Yellow Schedule and Chris Kelly of Pinpoint Innovations. The audience of NCHDs, consultants, and medical students challenged debaters on their views of translational innovation and discussed how blue-sky thinking can be approached in a resource-limited environment.

Spark Seed Funding

To fund and support development of NCHD ideas, NDTP launched the Spark Seed Funding programme in November 2017, followed by the first workshop for successful projects in February 2018. Participants pitched their ideas and collaborated with other NCHDs to review and improve their plans. Candidates will present the results of their projects at the NDTP Awards in June 2018.

Upcoming events

In January 2018, NDTP will hold its first online discussion with a combined Facebook and Twitter livestream webcast.

In February 2018, NDTP will host an Innovation Strategy morning. Up to 30 participants will attend, including NCHDs, consultants, academics, researchers, industry, educators, patients, and international guests. The workshop will be facilitated by Prof Barry McMahon of Tallaght University Hospital. Output from the event will inform the NDTP Innovation Strategy.

In collaboration with the HSE National Library and Knowledge Service, NDTP Spark will fund the world's first National Healthcare Wikipedian in Residence (NHWiR). Wikipedia is the 5th most popular website in the world and is a major source of healthcare information for both clinicians and patients. The NHWiR programme will offer a doctor protected time to edit and improve healthcare-related Wikipedia articles and to promote Wikipedia among medical students and doctors.

Continuing the success of the 2017 Neurotransmitter programme, NDTP will launch the Ignite! innovation competition for the Saolta Group in 2018. Clinicians will work with mentors to develop and test their ideas before pitching to a panel of innovators for a grand prize.

As part of the NDTP Excellence in Medical Education and Training Awards in June 2018, the BrightSpark Awards will recognise NCHDs who have contributed innovation and daring ideas, acknowledge the colleagues who support innovators to succeed, and highlight interesting projects from around the country. NCHDs will be invited to nominate colleagues for awards.

More information on Spark! can be found at: www.hse.ie/spark



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