

PRACTITIONER HEALTH
MATTERS PROGRAMME

ANNUAL REPORT 2020





CHAIRMAN'S REPORT

Chairman, Board of Trustees

Dear Colleagues

I am very pleased to introduce the 2020 annual report of the Practitioner Health Matters Programme.

The programme which was launched in September 2015 has continued to expand as evidenced by a steady increase in the numbers of practitioners availing of the service. Our Board remains committed to providing a confidential programme for practitioners who may be experiencing difficulties and who need to avail of discrete medical advice. We recognise that raising awareness of the service is essential so that all practitioners, their families and concerned colleagues will know of the existence of the programme and how to contact us for help.

We know from the outcomes and the feedback we receive that the service provided by PHMP is a vital support to practitioners who are going through a difficult time and who require confidential, professional advice.

On behalf of my fellow Trustees, I would like to take this opportunity to thank all the organisations who continue to financially support and endorse the work of the programme. We also appreciate that the three regulatory bodies continue to demonstrate their confidence in the work we do through the signed Memorandum of Understanding we have with each of them.

Despite the difficult year all healthcare professionals experienced during 2020, we are proud that the service remained operational throughout the pandemic and are also proud of the outstanding support offered to our colleagues in difficulty.



MEDICAL DIRECTOR'S REPORT

Dr Íde Delargy - Medical Director PHMP

It gives me great pleasure to provide the Medical Director's report on the progress of the PHMP service for 2020.

There can be no doubt that 2020 was the most extraordinary year in living memory. From the outset, Covid-19 had a profound impact on the lives of many of our healthcare professionals resulting in widespread extra demands and challenges. For dentists it required them closing their practices for a period of time as contact with patients was restricted. For most doctors and pharmacists, it required them to remain on the frontline looking after their patients while adapting to using personal protective equipment (PPE) and pivoting into new roles. In some instances practitioners were unable to go home to family and friends for fear of spreading the virus. There were understandable worries in relation to the uncertainty about the virus and this resulted in significant additional stress and anxiety for practitioners. The hugely increased workload also contributed to both mental and physical fatigue and the lack of time off heightened the feelings of fatigue. The PHMP service continued to operate throughout the Covid

pandemic and we were able to provide vital support and a listening ear for practitioners during these difficult times.

Many people experience shame and stigma when confronted with a mental health or substance use problem. Practitioners are no different to the general population in this regard but often find it difficult to seek help and to know where to access confidential help. Practitioners often delay in seeking help and sometimes wait until they find themselves in crisis before getting the help they need.

For reasons of time, accessibility or confidentiality, some practitioners may not wish to avail of the services of their own GP or their Occupational Health service but instead will try to self manage and sometimes self medicate their symptoms. This unfortunately can compound their problems. PHMP can offer an alternative route to recovery which is confidential, safe and non-judgemental and it is our aim that every doctor, dentist and pharmacist should be aware that this service is available to them.

The endorsement of the three regulators through a Memorandum of Understanding is of vital importance to the running of the PHMP service. The advice, treatment and therapy is provided without the obligation to report to the Irish Medical Council (IMC), the Pharmaceutical Society of Ireland (PSI) or the Dental Council (DC) regardless of how severe the issues are. The care provided is compassionate and non-judgemental. We receive regular feedback from the practitioners who have attended the programme and find that this is overwhelmingly positive. Practitioners are appreciative of the time taken to help them explore often quite complex underlying and unresolved issues. Many will find the experience of being able to disclose their difficulties in a safe environment hugely beneficial. We listen intently with an empathic, understanding and compassionate ear to their histories -many will find that is therapeutic in itself.

It is a privilege to help our colleagues on their recovery journey back to full health. We listen and validate their concerns and fears while helping to map out a recovery plan for them. Outcomes are very good and the majority of those attending will be able to continue to work while being supported or will return to work after a period of time off.

This year has been a unique one and we have focused our efforts on being available to offer help to practitioners who have required support. Our plans for expanding the service and engagement with key stake holders on making healthcare settings more tolerable have taken a back seat during 2020. We continue however to raise awareness of the service through regular virtual lectures and teaching opportunities conducted throughout the year.

I wish to personally acknowledge the ongoing support of Dr Justin Brophy with PHMP who is providing a Consultant Psychiatrist service to PHMP. I would also like to acknowledge the work and guidance of the Clinical Advisory Group (CAG) who give of their time generously. I am grateful for the hard work of our administrator, Ms. Sarah Keegan and Ms Katherine Madden of Blackrock Healthcare for their humane and caring approach to all the practitioners who attend the service. This is much appreciated.

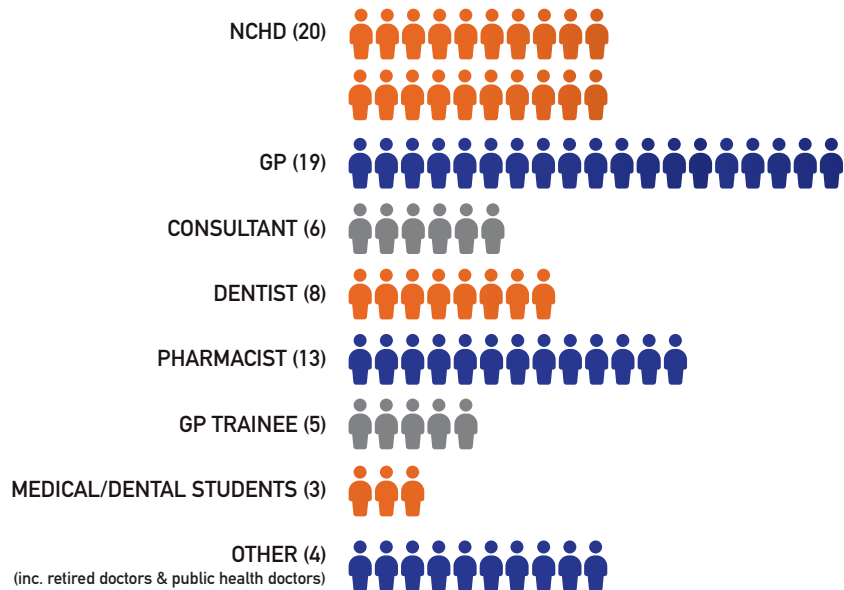


Dr Íde Delargy
Medical Director, PHMP

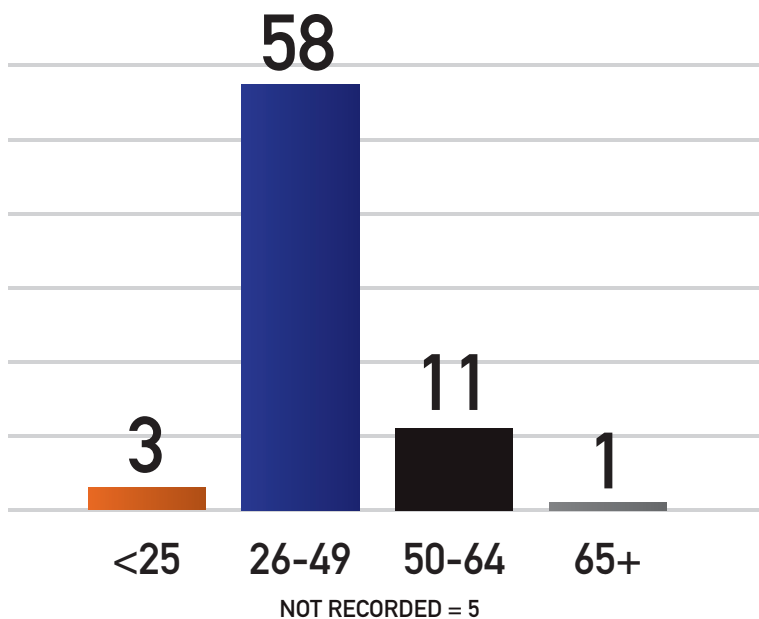
ANALYSIS OF PRACTITIONER PATIENTS 2020

There were 78 new presentations to PHMP in 2020. Each person was assessed and managed by PHMP along with the other existing patients of the programme. See below analysis of the new presentations during 2020

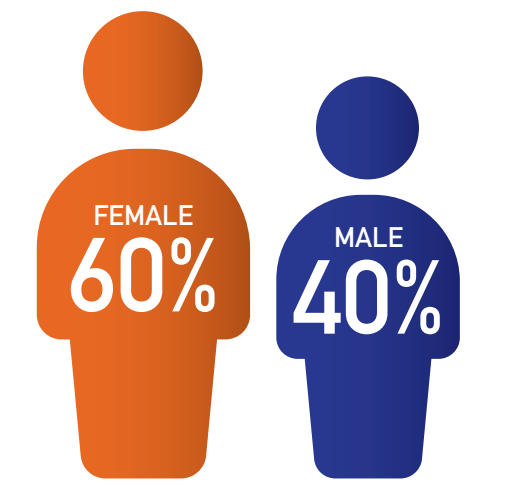
BREAKDOWN OF NEW PRESENTATIONS DURING 2020



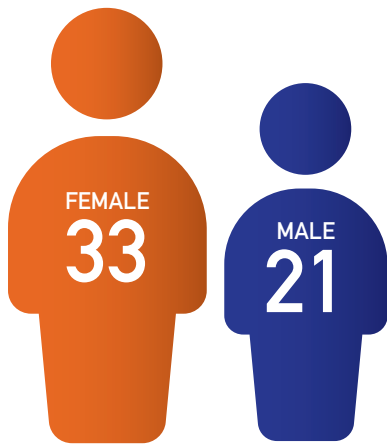
AGE PROFILE OF NEW PRESENTATIONS 2020



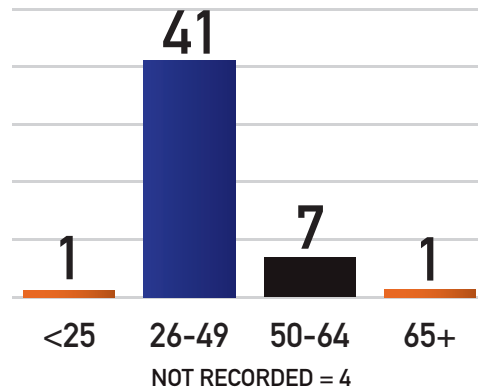
MALE V FEMALE



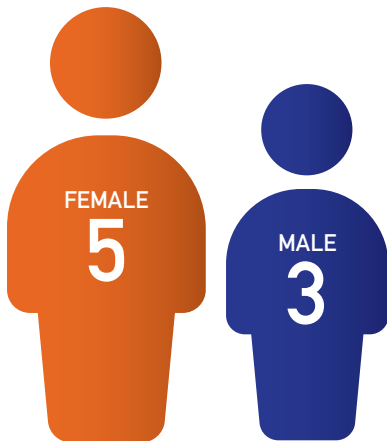
DOCTORS
MALE V FEMALE



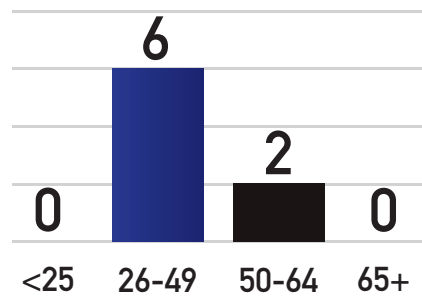
AGE PROFILE OF DOCTORS



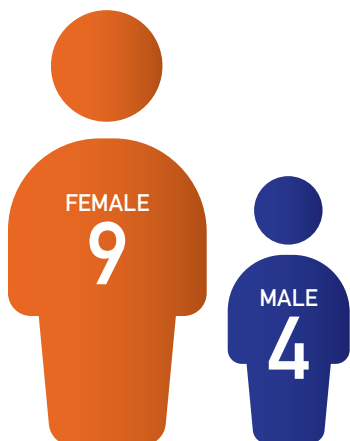
DENTISTS
MALE V FEMALE



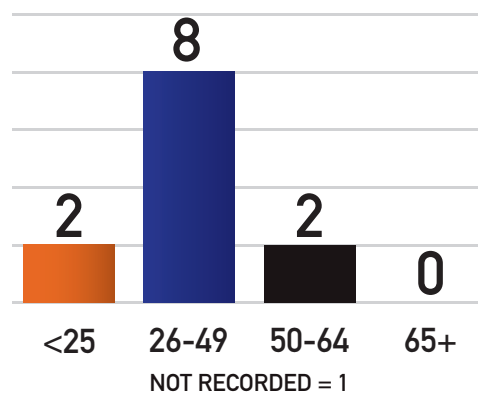
AGE PROFILE OF DENTISTS



PHARMACISTS
MALE V FEMALE



AGE PROFILE OF PHARMACISTS



SAMPLE CASES

Please note that the names used in these case studies are fictitious and some details have been amended to protect the identity of the individuals.

■ CASE 1

MARY - GP IN HER 40's

This GP self-referred to PHMP as she was feeling distressed and upset as a result of a difficult practice dispute. She was a partner in a practice but felt that she was unsupported by her colleagues. The nature of the dispute was that her colleagues felt she was not working as hard as others in the practice during the Covid-19 crisis. She was upset about these comments and was not sleeping which exacerbated her levels of stress and anxiety. In her personal life she felt responsible for her elderly parents and also had young children to mind with no additional support as her partner was also a medical practitioner and working excess hours at the time. She became very anxious about doing face to face work in the practice and was worried about the risk of bringing the virus home to her parents and family. She had not disclosed to her partners the underlying reasons and additional stresses which were contributing to her concerns as she felt ashamed to admit she was struggling.

On presenting to PHMP we were able to identify that she had suffered with anxiety for quite some time. We helped her become aware of the triggers for her anxieties and worked with her on finding a resolution to the perceived hostility from her colleagues. She also learned how to manage her anxieties in a healthier way. She did not require medication and improved slowly over time. Feeling listened to in a safe, non-judgemental environment and getting pragmatic supports to help her cope better were the essential elements to improving her mental health.

■ CASE 2

CONOR - A CONSULTANT PHYSICIAN IN HIS 50's

Conor attended PHMP with a range of different issues. He had been through a difficult and acrimonious separation and was not allowed to see his children. He was experiencing financial troubles, partly as a result of the marriage break up but also due to poor investments in the past. Even prior to the Covid – 19 crisis he had become disinterested in his work and was finding it increasingly difficult to motivate himself to engage. He reported that it was a struggle to get out of bed some days and he was having to force himself into work. When Covid -19 struck he was required to take on extra work, be adaptable and pivot in terms of the type of work he was required to do. This proved too much and he became overwhelmed. His self-care was very poor and he was taking no exercise and over eating as a stress reliever. His anxiety levels increased and he was not sleeping. A concerned colleague encouraged him to attend and seek help from PHMP. At assessment it was clear that there were underlying childhood trauma issues which needed to be addressed and we encouraged him to attend our psychologist to address these. He was signed off work for a period of time and was seen weekly by the programme. Over time he regained his confidence and is now working at full capacity again.

■ CASE 3

PETER - TRAINEE IN HIS EARLY 30's

This young doctor is a trainee in medicine having completed the graduate entry medical programme. He had suffered with some depression while a student and had accessed student counselling services. During the Covid-19 crisis he was deployed in a different area of the hospital and so was separated from his regular team colleagues. As others became unwell and had to isolate, Peter had to do extra work and extra shifts. He became physically and emotionally exhausted. To compound matters, his workplace was a long distance from his family and friends which heightened his isolation as he was unable to travel to see them. He became overwhelmed and his mood became depressed. Once he contacted our service we were able to guide him back to health through a combination of medication and talking supports. He recovered quickly and gained his confidence again.

■ CASE 4

SARA - A PHARMACIST IN HER 20's

This young lady had recently qualified as a pharmacist and had started working in a community pharmacy. She recognised that she had debilitating levels of anxiety which were affecting her work and impacting on her sleep. She was disappointed after all her studies that she was not enjoying her work. On assessment it was evident that Sara had a binge eating disorder which she resorted to as a way of coping with her anxiety. She had never discussed her problem with a professional and not sought help for it in the past – she felt ashamed. Through supportive listening, the support of a dietician as well as appropriate psychological interventions she is making steady progress. The binge eating as a coping mechanism has been replaced by healthier coping strategies. Sara continues to attend regularly and continues to avail of the available support.

■ CASE 5

MARK - A DENTIST IN HIS 40's

Mark presented in the early stages of the Covid-19 crisis. His dental practice had to close in line with government advice. He was highly anxious and distressed and felt suicidal. There were a range of factors contributing to his heightened levels of anxiety including his own underlying illness which increased his risk of death if he became infected. He was catastrophising and constantly ruminating on all the things that could go wrong. He was not eating, had lost weight and could not sleep. Medication was required to address his acute levels of anxiety and there was genuine concern for his safety. A family member was included in his management plan and he was monitored closely. His anxiety levels gradually subsided and in time he regained a healthier perspective on his future. He did not have a GP when he presented initially but he was encouraged to register with a local practitioner who would deal with his underlying medical condition.

SUMMARY OF KEY LEARNING POINTS FOR PRACTITIONERS

Based on our experience of supporting many practitioners over the years, there are some common themes that emerge. The following are the key learning points:

The impact of a patient complaint or adverse event on a practitioner can have a serious effect on the mental health and functioning of the practitioner. Suicidal ideation is common in these situations and particularly if a person has other underlying vulnerabilities. Compassionate and supportive care is essential in these cases and they need to be managed sensitively and carefully.

Most practitioners appreciate the benefit of strict monitoring and drug screening when they are trying to recover from a substance use problem. As well as being an essential component of their recovery, it is also important in evidencing sobriety from the patient safety perspective or for the regulator where required.

Being aware of your risk factors and vulnerabilities is important. Many practitioners who attend our service will have experienced some difficulties in adolescence or as students in college. During stressful periods these may become overwhelming and can cause significant dysfunction in the workplace for the individual. Helping practitioners to recognise these features and helping them to have strategies in place to help them to cope better is an essential part of the work we do with individuals

Doctors, dentists and pharmacists are not immune to the risk of addiction particularly those with underlying genetic risk factors. In fact the evidence would suggest they are at greater risk of substance use disorder and addiction. Easy access to medications as well as the ability to self-prescribe addictive medications increases the risk significantly.

Practitioners are very good at advising our patients about lifestyle changes but often forget the same lifestyle advice applies to us too. Many practitioners will know what lifestyle adjustments are required but some need the advice and support of an external professional to empower them to make the necessary changes themselves.

PATIENT FEEDBACK

“Thank you for taking the time to listen to me and for your reassurance when I contacted the service. It turned out to be a turning point in my life”

“I never thought I would be one of those doctors who suffer with burnout and stress. I now realise how I was taking too much on and trying to be there for my patients and everyone else. I wasn’t paying enough attention to my own needs. Attending PHMP has helped me to learn that I need to be able to say no more often and conserve my energy for the essentials”

“I felt suicidal when I attended first and had lost all perspective. I felt there was nothing to live for – I had made a big mistake and my career was over. Through careful listening and gentle advice, you helped me get my issue into perspective. I am back to myself again and have thankfully regained my confidence in my ability as a doctor”

“It was such a relief to attend your service and feel I could speak in confidence with another professional. This was a major issue for me. I couldn’t speak to my own GP as she knows all my family and so I felt there was nowhere to turn. I wish I had known about your service sooner”

“I wish every doctor knew about this service. You are the first person I disclosed my binge eating problem to. With your calm and pragmatic advice I have made huge progress. I have now shared my shameful secret with my parents and some close friends. I appreciate everything you have done so far”

“Thank you for your support, concern and cajoling. I am truly grateful and appreciate the time and effort you have given me in such a respectful manner.”

“I wish I had known about Practitioner Health sooner. You have made such a difference to me and my life has improved immensely since I sought the help of the service. Thank you from the bottom of my heart.”

“Almost as soon as I made contact with the service I thought I had made a big mistake. Fortunately I did attend for the appointment you provided and my situation continues to improve on a daily basis. I would be lost without the service.”

THE BOARD OF PHMP WISH TO THANK ALL OUR SUPPORTERS WHO HAVE CONTRIBUTED IN MANY DIFFERENT WAYS AND IN PARTICULAR OUR FINANCIAL SUPPORTERS.

These include: Irish College of General Practitioners, the Faculty of Radiology, Irish Dental Association, the Dental Council, Irish Pharmacy Union, Irish Medical Organisation, the Medical Council, the Faculty of Ophthalmology, the Faculty of Obstetrics and Gynaecology, HSE, Medisec, the Medical Protection Society and the Dental Hospital, The Sheppard Trust, The Sick Doctor Trust, St Patricks Hospital (Dean Clinic), the Royal Medical Benevolent Fund, the Dental Benevolent Fund, College of Psychiatry, the RCPI, the RCSI, the Kildare and Merrion Clinical Societies. We also received individual donations from practitioners for which we are very grateful.

The Board acknowledges the work of the Medical Director Dr Íde Delargy, Consultant Psychiatrist Dr Justin Brophy, our Administrator Ms Sarah Keegan and the support and dedication of the Clinical Advisory Group.

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