

The background of the cover is a photograph showing the back of a healthcare professional in a teal uniform on the left, with their right hand resting on the shoulder of a patient in a maroon sweater on the right. The scene is set outdoors with a blurred green background, suggesting a garden or park. The lighting is soft and natural, coming from the upper left.

PractitionerHealth
LOOKING AFTER YOUR WELLBEING IN CONFIDENCE

PRACTITIONER HEALTH
MATTERS PROGRAMME

ANNUAL REPORT 2021



CHAIRMAN'S REPORT

Mr Hugh Kane - Chairman PHMP

Dear Colleagues

I am very pleased to introduce the 2021 Annual Report of the Practitioner Health Matters Programme. The programme, which was launched in September 2015, has continued to expand with a steady increase in the numbers of practitioners availing of the service.

Our experience confirms the need for a discrete, designated, confidential programme for practitioners who are facing health difficulties. However we recognise the continuous need to raise awareness of the service so that all practitioners, their families and concerned colleagues will know how to seek help in a time of crisis.

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.

I am delighted to report that our finances are now more secure, ensuring we can continue to provide high quality services into the future. In addition, we are Charity Regulator compliant with audited accounts submitted annually.

This is my last Annual Report as Chairperson of PHMP. I am pleased to announce that Professor Frank Murray will be taking over as Chairperson of the Board and Ms Siobhán Kelly is the new Honorary Secretary. I wish them well in their new roles and am confident that they will capably steer the organisation in the future.

A handwritten signature in blue ink, appearing to read 'H Kane'.

Mr Hugh Kane
Chairman, PHMP



MEDICAL DIRECTOR'S REPORT

Dr Íde Delargy - Medical Director PHMP

I am pleased to report on the work of the Practitioner Health Matters Programme (PHMP) for 2021.

Practitioners are no different than the general public when they are faced with a mental health or substance use problem. There is a sense of shame and stigma in having to admit you have a problem but, in addition, practitioners with such problems can often find it difficult to access confidential assistance. It is not easy to have to access mental health support or treatment if you have to do this in a place where your own patients may be attending or a colleague may be providing the treatment. That creates a significant barrier for practitioners to seek help and many continue to self-manage and occasionally self-medicate their symptoms.

One of the priorities of PHMP is to ensure that all doctors, dentists and pharmacists are aware of the service and how to access us. The confidential nature of the service we provide, as well as the independence of the service may provide reassurances to practitioners seeking help. Through our Memorandum of Understanding with each of the three regulatory bodies, we continue to enjoy the endorsement and support of the Irish Medical Council (IMC), the Pharmaceutical Society of Ireland (PSI), and the Dental Council (DC).

The interventions we offer are those of active listening, advice, treatment as well as onward referral as required. Our service is compassionate and non-judgmental which practitioners appreciate. With the help of our support and advice the majority of individuals who attend the service will be able to continue working. Others may need some time off work with a plan to return when sufficiently recovered.

I would like to express my ongoing gratitude to Dr Justin Brophy, Consultant Psychiatrist, for his ongoing service to PHMP and also to Professor Jim Lucey, Consultant Psychiatrist, who joined our team in 2021. I would also like to welcome Professor Jane Marshall, from the Maudsley Hospital, London, who joined our Clinical Advisory Group (CAG) in 2021 and to thank the rest of the CAG members for their work and guidance. They generously give of their time and expertise to support the delivery of the PHMP service.

I would like to acknowledge the caring and humane approach of our administrators, Ms. Sarah Keegan and Ms Lydia McLoughlin as well as Ms Katherine Madden and Ms Alicia Keane from Blackrock Healthcare in their dealings with all the practitioners who attend our programme.

Dr Íde Delargy
Medical Director, PHMP

REASONS FOR PRESENTING TO PRACTITIONER HEALTH

Practitioners present with a wide range of conditions and concerns to the Practitioner Health service. Predominantly we see people with anxiety, depression, substance use issues and burnout. It is rarely just one thing which causes somebody to present. In general, it is a combination of factors which precipitate the referral. We see practitioners who recover well with simple reassurance, as well as gaining insight and perspective on their problems. Some present with severe mental health challenges including suicidal ideation. This is a cause of great concern in practitioners, as we know the rate of completed suicide is higher in this group. The service recognises that practitioners can be slow to seek help, even in the most extreme circumstances and we also recognise that sourcing that help can be a barrier to recovery. We have a range of supports at our disposal, which are offered with the primary intention of restoring the person to full health and allowing them to return to work in a healthier frame of mind.

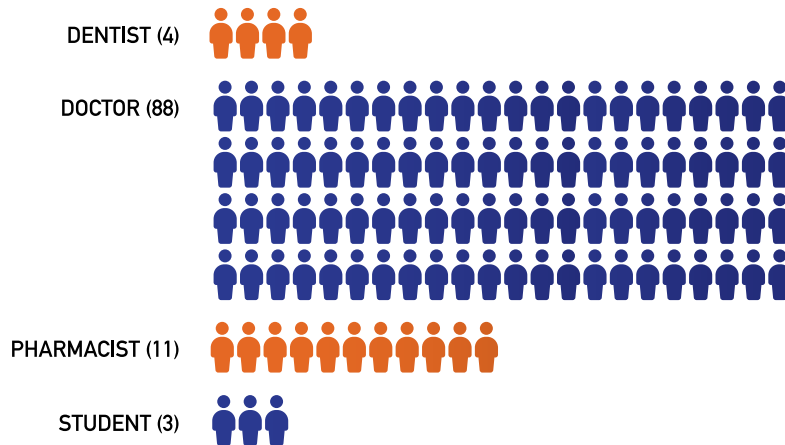


ANALYSIS OF PRACTITIONER PATIENTS 2021

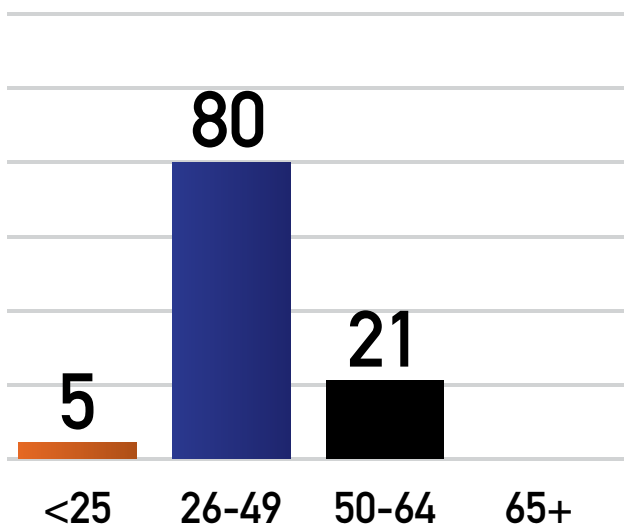
There were 106 new presentations to PHMP in 2021. Each person was assessed by one of the doctors on the PHMP team and a care plan is agreed with each practitioner. As well as each new presentation, there is ongoing engagement with the other existing patients of the programme.

NEW PRESENTATIONS 2021

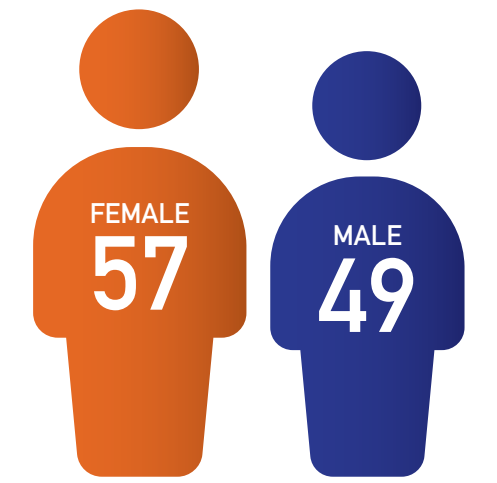
OCCUPATION



AGE RANGE

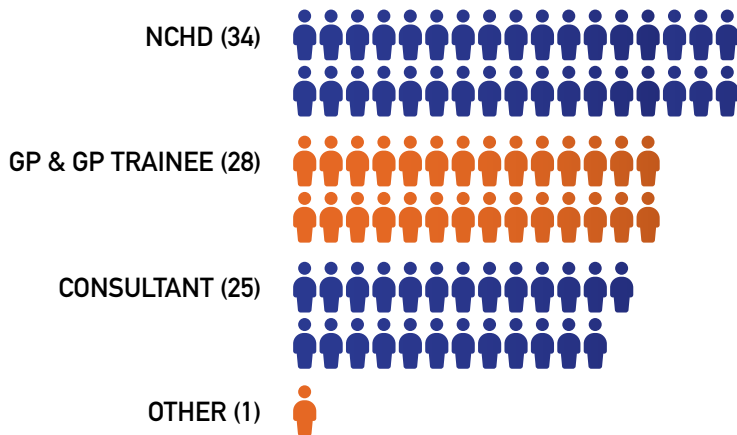


GENDER

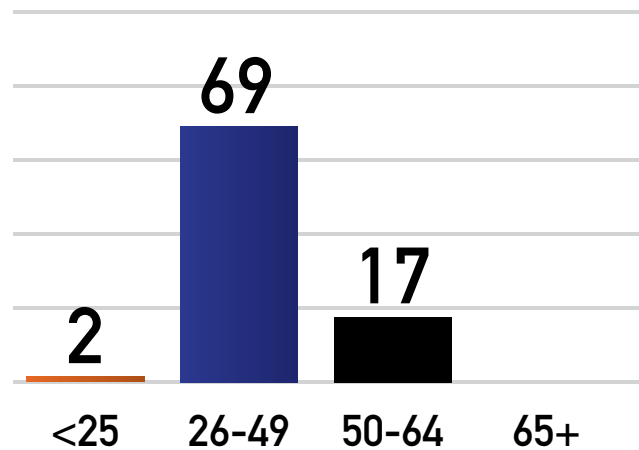


NEW DOCTOR REFERRALS 2021

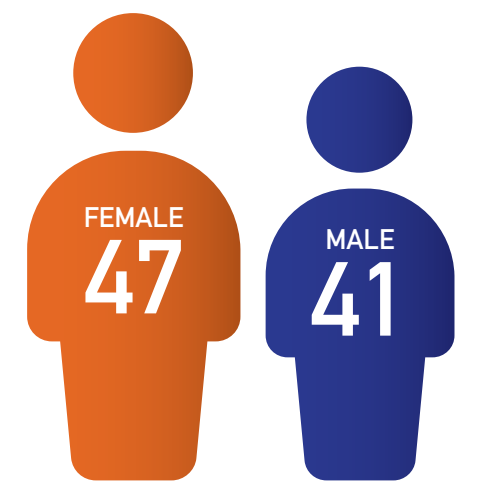
STAGE IN CAREER



AGE RANGE

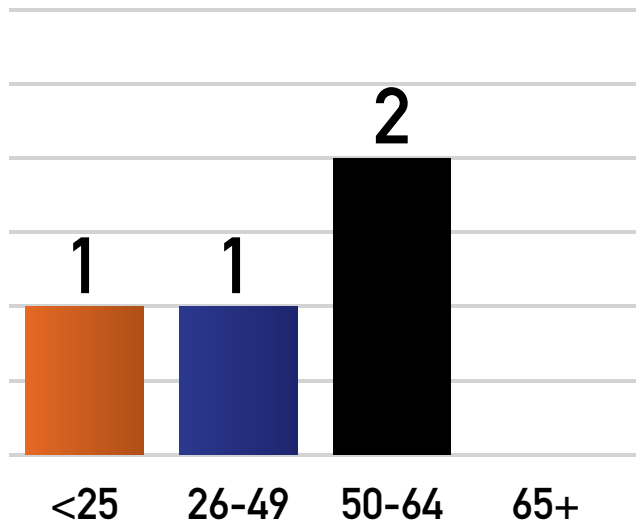


GENDER

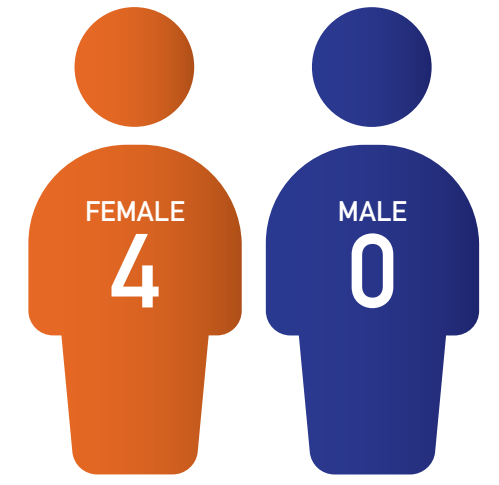


NEW DENTIST REFERRALS 2021

AGE RANGE

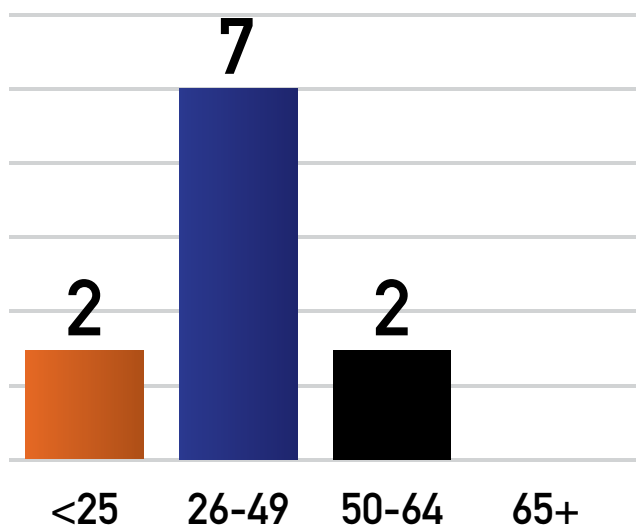


GENDER

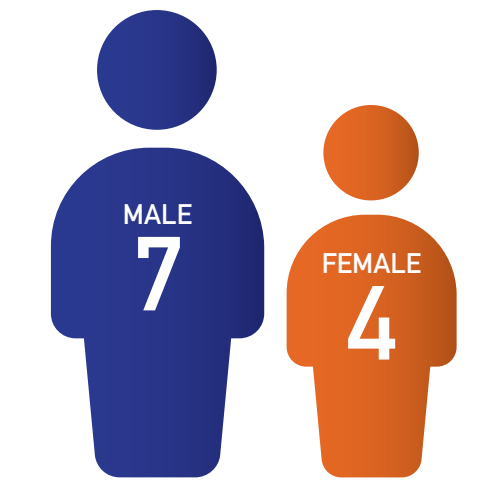


NEW PHARMACIST REFERRALS 2021

AGE RANGE

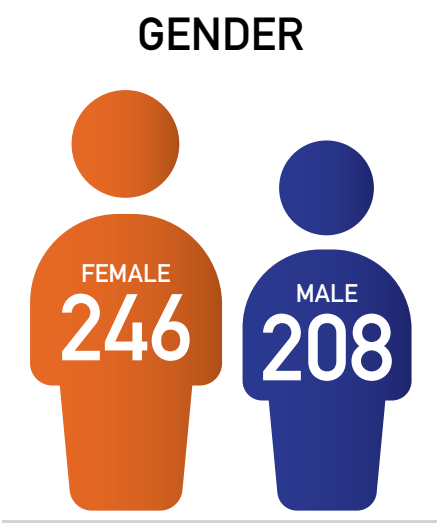
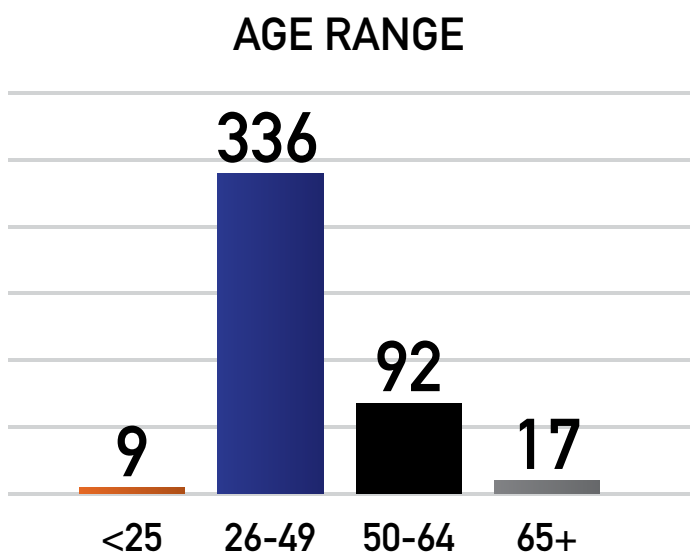
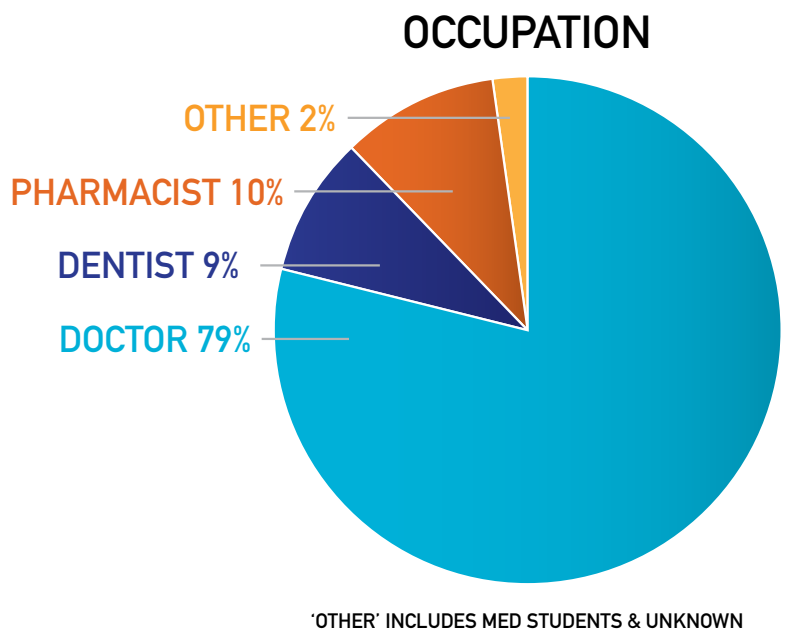


GENDER

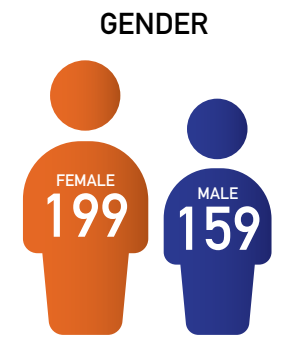
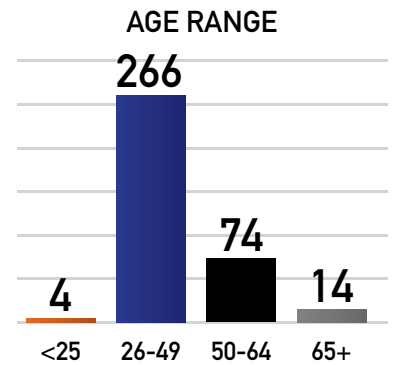
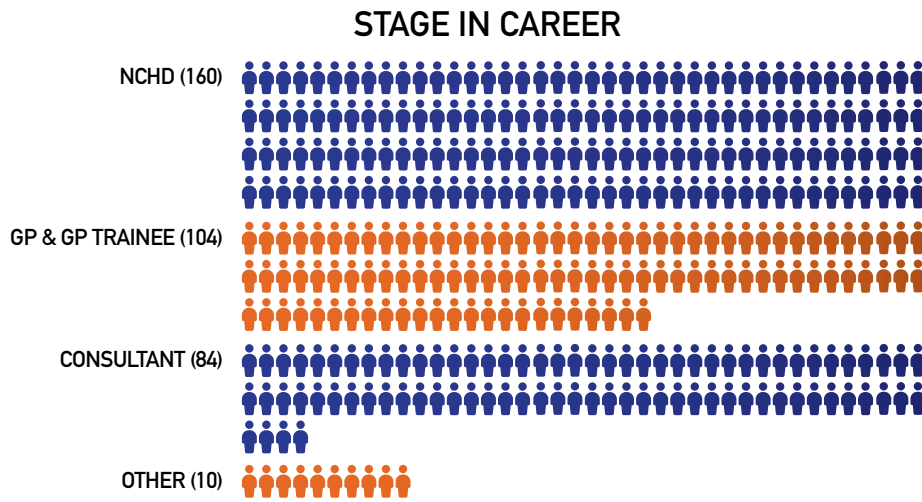


PROGRAMME ACTIVITY SINCE COMMENCEMENT

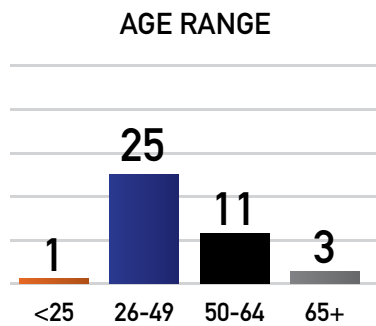
The PHMP service commenced in 2015 and since that time the programme has supported 454 patients. There have been just short of two thousand consultations during this time. These statistics do not include the therapy engagements. Some of the patients were referred for individual supportive therapy funded by PHMP. These sessions are with preferred therapists who are part of the extended care team.



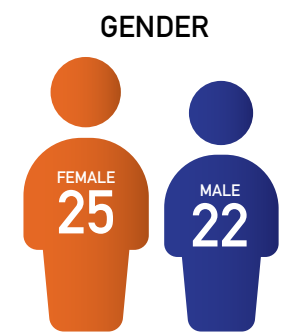
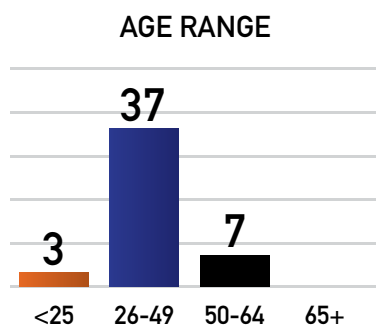
ALL DOCTORS



ALL DENTISTS



ALL 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

MICHAEL - CONSULTANT IN HIS 60's

He attended feeling burned out and depressed. He had been working in his particular specialty for over thirty years. The extra work involved during Covid, as well as the requirement to manage patients remotely, left him feeling anxious and exhausted. Prior to the pandemic he had been regularly flagging the lack of resources and poor administrative backup with hospital management. This had left him frustrated and a feeling that he was not valued for the work he did. Once Covid struck, he was then under additional pressure to manage his service with even less staff and support. Overall, he wanted to quit medicine but was conflicted as he felt a duty to continue to look after patients and not to let his colleagues down. Supportive listening, feeling valued and gaining perspective on his situation, all helped to help him recover his resilience. Helping him to make his case with hospital management and supporting him on this, allowed him to continue with his career and to find enjoyment in his work again.

■ CASE 2

FIONA - GP TRAINEE IN HER 30's

This young lady attended due to anxiety and overwhelm. She was a graduate entry to medicine having fulfilled her dream to qualify as a doctor. She was now in a demanding specialty which required significant physical as well as emotional resilience. The on-call rota was demanding and consequently her sleep was badly affected, which in turn contributed to a sense of exhaustion. At the time of presentation she was tearful and feeling hopeless. Having driven herself to get to where she was in medicine, she was now feeling she could not continue on. She was helped by taking a short period of time off work, in order to gather her thoughts and rest. There was a background history of depression and anxiety as well as a familial one which heightened her risk factors for burnout. Taking a pause from work and talking through her options proved very helpful. The back-to-work plan involved her being off-call for a period of time. She did not need to be medicated and she returned to work feeling stronger in herself with ongoing support in place.

■ CASE 3

DECLAN - DENTIST IN HIS 50's

He attended as a result of concerns raised by a colleague about his alcohol intake. He attended reluctantly and was resistant to the idea that he had any problems with alcohol. Following assessment using the AUDIT scale and on exploring his association with alcohol, he gradually accepted that alcohol was indeed a problem for him and that already it was impacting on his family and work relationships. We agreed a programme of regular reviews, addiction counselling and monitoring which is ongoing. He admits to a number of relapses but overall he accepts the benefit and impact of abstinence in his life.

■ CASE 4

PATRICIA - PHARMACIST IN HER 20's

She had an adverse event at work. There was no serious outcome to this event but she was required to provide a report to her pharmacy supervisor about it. She had become highly anxious with ruminative thoughts and was unable to sleep. She was worried continuously that she would make another mistake and was questioning her ability to continue in the profession. As a student she had an eating disorder for which she needed professional help, and while this was currently reasonably under control, in times of stress she resorted to restrictive eating again. Providing her with supportive therapy and regular reviews was sufficient to allow her to continue working and to gain control over her anxiety.

■ CASE 5

CONOR - GP IN HIS 40's

He suffered a road traffic accident 3 years prior to attending PHMP. He was treated in hospital for a variety of injuries at the time of the accident from which he recovered well. However he continued to have persistent severe back pain which, despite numerous interventions, was both unexplained and could not be resolved. His pain interfered with his ability to work and also interfered with his ability to enjoy life. A friend and colleague suggested he attend the PHMP service and, following initial assessment, he was referred to the PHMP Consultant Psychiatrist. He was commenced on antidepressants and regularly reviewed. This has made a significant difference to his pain and to his overall mood, which in turn has helped him enjoy his work again.

SUMMARY OF KEY LEARNING POINTS FOR PRACTITIONERS

There are several similar characteristics that emerge from our experience helping many practitioners. The following are the key learning points:

IMPORTANCE OF GOOD SELF-CARE

In times of stress our ability to self-care can be compromised. This can be due to lack of time, a sense of being overwhelmed and ruminative, negative thinking. It is important to have well-established, healthy routines which will sustain us during pressurised times. The principles of good health and wellbeing include taking exercise, getting adequate sleep as well as healthy eating habits. It is noticeable that many practitioners who attend have lost sight of these basic principles of wellbeing – a reminder is often the first step to recovery.

SECOND VICTIM SYNDROME

The impact of a patient complaint or adverse event on a practitioner can have a serious effect on their mental health and functioning. 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 each practitioner needs to be managed sensitively and carefully.

Being aware of your risk factors and vulnerabilities is important. We are mindful of the fact that practitioners who attend our service may have experienced some difficulties in adolescence, as a student or at an earlier stage in their career. 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.

MORAL INJURY

Medicine is a challenging career. A number of clinicians have attended the service suffering with symptoms suggestive of burnout. Some have spoken about the advocacy roles they have taken up on behalf of their service and their patients. Some have reached a point where they want to give up their career and leave medicine. They have become despairing and pessimistic. Some may be grieving about their shattered careers and have suicidal thoughts. Being party to a service which is under resourced and not optimally functioning is a significant cause of distress for a clinician, particularly when the solutions are outside their control. Part of the recovery process for practitioners who are in this situation, is to provide an empathic listening ear, as well as encouraging them to consider what they can contribute in a positive way to their patients, even when the system they work in is less than perfect.

SUCCESSFUL OUTCOME IN SUBSTANCE USE CASES

Doctors, dentists and pharmacists are not immune to the risk of addiction, particularly those with underlying genetic risk factors. In fact, international evidence would suggest they may be at greater risk of substance use disorder and addiction due to easy access and their ability to prescribe addictive medications.

Evidence supports the benefit of monitoring and drug screening with better outcomes achieved for those who participate. For our practitioners, we emphasise the role monitoring has to play in the overall recovery process. In the interest of patient safety, it is essential and also a requirement that a practitioner is accountable to their regulatory authority.

PATIENT FEEDBACK

"I am just writing to you to thank you for your kindness and support over the last few years. I can honestly say that my job satisfaction and my morale are at an all-time high. I just want to thank you so much for your input. It was a complete game-changer for my career and my life in general when my mentor directed me to your service. I was going through a turbulent time both professionally and personally when I first met you. I was struggling with mental and physical ill-health. From the outset you adopted a very practical, compassionate and non-judgemental attitude to my problems."

"I just wanted to write to thank you for all your help last year. My father died in April after a long period of illness. Thanks to your help last year I feel I was able to be present with him in this time and I am so grateful for your wonderful service."

"Massive thanks for kindly contributing to making patients safe by making physicians safe."

"I want to say thank you for your time and attention to me over the last number of months as I began my recovery from a difficult and traumatic time."

"Thank you for running this wonderful service. It is of such importance to the profession."

"I want to say a big thank you for looking after my wife. She has improved so much since attending your service and I can honestly say she is the best she has been in years. Before this she was continuously worried about her job and worried about making mistakes. She was out of work for months. The practical and supportive advice she has received since she started to attend your service has been amazing."

"Just a little note of thanks for helping me to fly again! Your gift is bringing people back to their own nature and helping them to fully recover. I am forever grateful!"

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

Our financial supporters include: Challenge Insurance, Clanwilliam Health, College of Anaesthesiology Ireland, the College of Psychiatry, the Dental Council, the Dental Benevolent Fund, the Dental Hospital, the Faculty of Obstetrics and Gynaecology, the Faculty of Radiology, the HSE, Irish College of General Practitioners, Irish Dental Association, the Irish Hospital Consultants Association, the Irish Medical Council, Irish Medical Organisation, the Irish College of Ophthalmologists, Irish Pharmacy Union, the Kildare and Merrion Clinical Societies, the Medical Protection Society and Dental Protection, Medisec, National Doctor Training Programme, The Sheppard Trust, The Sick Doctor Trust, St Patricks Hospital (Dean Clinic), the Royal College Physicians of Ireland, the Royal College Surgeons of Ireland, the Royal Medical Benevolent Fund. 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 Psychiatrists Dr Justin Brophy and Professor Jim Lucey, and our administrative staff of Ms Sarah Keegan, Ms Katherine Madden and Ms Lydia Mc Loughlin all of whom have played a vital role in supporting the service. We also acknowledge the support and dedication of the Clinical Advisory Group who all give generously of their time and expertise. We express our sincere gratitude for the commitment of the two trustees who stepped down in 2021, Dr Kieran Doran and Dr David Thomas.

We would especially acknowledge the work of Ms Alicia Keane for her help in compiling this report.

MR HUGH KANE CHAIRMAN

MR FINTAN HOURIHAN HONORARY SECRETARY

MR JOHN O'CONNOR HONORARY TREASURER

MR BARNEY MURPHY TRUSTEE

DR DAVID THOMAS TRUSTEE

PROF FREDDIE WOOD TRUSTEE

MR ANTHONY OWENS TRUSTEE

MR JULIAN SMITH TRUSTEE

MS NOELEEN HARVEY TRUSTEE

DR MUIRIS HOUSTON TRUSTEE

MR NOEL KAVANAGH TRUSTEE

REFERENCE AND ADMINISTRATIVE DETAILS

Name Practitioner Health Matters Programme
Registered Address 41 Main Street,
Blackrock, Co Dublin

Registration Numbers

Company Registration Number 529820
Registered Charity Number 20200787
Revenue Charity Number 21035

Auditors DHKN Limited
Galway Financial Services Centre
Moneenageisha Road
Galway

Bankers Allied Irish Banks PLC
Blackrock
Co. Dublin

Solicitors O'Connor Solicitors
8 Clare Street,
Dublin 2

Contact Details Practitioner Health Matters
41 Main Street, Blackrock, Co Dublin
085 760 1274
confidential@practitionerhealth.ie
www.practitionerhealth.ie

Confidentiality: Practitioners can be assured of the highest integrity and confidentiality in their interactions with the PHMP. Confidentiality is fully assured for all practitioners who either refer themselves or are referred to us by an outside party. We are not obliged to report to the regulatory body for their profession as long as the practitioner is compliant with the treatment recommendations and that they do not constitute a danger to the public.

PractitionerHealth
LOOKING AFTER YOUR WELLBEING IN CONFIDENCE

Support, in Confidence

41 Main Street, Blackrock, Dublin

Tel: (01) 278 9369 / 085 760 1274

Email: confidential@practitionerhealth.ie

www.practitionerhealth.ie

RCN: 20200787 | CRO: 529820