



# Why our doctors are leaving Irish emergency medicine training

Jessica Pflipsen<sup>1</sup> · Cian McDermott<sup>2</sup> · Eva Mary Doherty<sup>3</sup> · Niamh Humphries<sup>4</sup>

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## Abstract

**Background** In recent years, attrition from Emergency Medicine (EM) training in Ireland has increased. Australian data illustrates that increasing numbers of Irish-trained doctors are embarking on EM training in Australia. This has implications for EM in Ireland, particularly for Emergency Departments already under strain. An adequate supply of qualified specialist EM doctors is essential to provide high-quality patient care.

**Aims** The aim of this study is to gain insights into the reasons for attrition from EM training in Ireland.

**Methods** EM trainees who exited EM training in Ireland 2011–2016 were invited to complete a survey which included quantitative and free-text questions.

**Results** Of 43 doctors who had exited EM training, 71% responded and although some respondents spoke positively about the speciality, overall, their feedback illustrated levels of frustration and dissatisfaction with EM training in Ireland. Respondents exited their EM training programme due to a lack of training received, despite being formally registered on an Irish EM training scheme. The other factors raised included dissatisfaction with the general working conditions in EM in Ireland with respondents highlighting heavy workloads, high work intensity, stress, staff shortages, and poor work-life balance.

**Conclusions** Our findings indicate the need to improve training and working conditions in Emergency Medicine in Ireland. These improvements are necessary to reduce attrition and improve retention of EM staff.

**Keywords** Attrition from Emergency Medicine training · Emergency Medicine · Medical education and training

## Background

Attrition from Emergency Medicine (EM) training in Ireland increased eightfold between 2011 and 2014 [1]. In 2015, almost twice as many Irish-trained doctors ( $N = 75$ ) enrolled on the advanced Australian EM training scheme [2] compared to the equivalent EM training scheme in Ireland ( $N = 38$ ) [1]. This resulted in unfilled posts in the Irish EM training programme and has implications for EM workforce planning in Ireland as an adequate supply of qualified specialist EM

doctors is essential for the current and future provision of high-quality patient care.

## Aims

This study sought to gain insights into the reasons for attrition from EM training in Ireland.

## Methods

The study was conducted in February 2016 with ethical approval from the Royal College of Surgeons in Ireland. All ( $N = 43$ ) trainees who exited the Irish EM training programme from 2011 to 2016 were invited to participate in an online survey. The study response rate was 71% ( $N = 30$ ). This paper presents responses to the free-text questions which asked respondents to reflect on their experiences of EM training in Ireland, focusing specifically on their reasons for attrition from EM training.

✉ Jessica Pflipsen  
j.pflipsen@kh-neuwerk.de

<sup>1</sup> Krankenhaus Neuwerk, St Augustinus Gruppe, Dünner Straße 214-216, 41066 Mönchengladbach, Germany

<sup>2</sup> Emergency Department, Mater Misericordiae University Hospital, Dublin, Ireland

<sup>3</sup> Royal College of Surgeons in Ireland, Dublin, Ireland

<sup>4</sup> Royal College of Physicians of Ireland, Dublin, Ireland

## Results

### Training

Respondents explained that the main reason for exiting their EM training programme was the lack of training and clinical support from their consultant trainers. Respondents explained that ‘training is non-existent. Complete service jobs. Consultants hiding in offices not on the floor. Morale at rock bottom [sic]’. They felt that support and career training opportunities were often neglected in the face of high service provision demands in Emergency Departments (ED). Dissatisfaction reported with EM training included a lack of dedicated teaching sessions and protected study time. One respondent outlined ‘EM is such an exciting specialty, but in Ireland you are a workhorse, and you can lose focus on training and learning’.

### Supervision

Another trainee highlighted patient safety concerns arising from poorly supported EM trainees as ‘the expectation and level of responsibility within an ED is enormous and at times overwhelming, there is a huge lack of senior support to ensure safe and appropriate clinical support to trainees (especially) in early years of training’. One respondent returned to Ireland from Australia and ‘was shocked and disheartened by how terrible the training was in Ireland compared to Australia. (...) I felt like I needed to leave the specialty for my mental health’.

### Workload

Poor working conditions in the Irish health system were cited as another reason for exiting EM training and are a common complaint among those who staff Ireland’s EDs [3]. Sixteen respondents highlighted heavy workloads, high work intensity, stress, staff shortages, poor work-life balance, and the relatively low salary levels attached to EM. As one respondent explained ‘I have worked in EDs in other countries and the major difference was the volume of shift work expected of a trainee’.

### Conditions

Respondants explained how they felt that ‘trainees seen as “cogs in the wheel” with no attempt to look after trainees’ welfare or consider work-life-balance [sic]’. Another respondent felt that this resulted in a vicious cycle of exhaustion as ‘lots of doctors in EDs are drained, physically and emotionally’. The adverse effects of poor work conditions and low staffing levels have been comprehensively documented in a recent workforce report [4].

Overall, the feedback received from trainees who had exited Irish EM training in this study illustrated levels of frustration and dissatisfaction with the quality of EM training in Ireland as well as with the excessive workload and negative working conditions.

## Conclusions

High rates of attrition from EM training in Ireland highlights a serious recruitment and retention challenge. Attrition interferes with workforce projections and may result in a reduced capacity to manage the ED workload, as well as a reduced capacity to provide training to future generations of EM trainees. As this trend continues, there will be a reduction in the future number of EM consultants in the Irish workforce although the numbers are low already. Currently in Ireland, there are 2.2 EM consultants per 100,000 population whereas in Australia, this number is 6.8 [4].

The results of this study are in agreement with a recent survey conducted among Irish surgical trainees [5]. Similar to EM trainees, surgical trainees cited poor work-life balance and adverse training opportunities as the main reasons for leaving their training programmes. The issue of attrition from postgraduate medical training is not limited to EM trainees and is linked to a wider and nuanced combination of push and pull factors [4, 6].

This study indicates that attrition from EM training is a serious cause for concern and will negatively affect the specialty of EM if left unchecked. High attrition is related to wider health system issues such as high workload, high work intensity, and low staffing levels. As a result, high attrition rates inevitably make a difficult situation worse for those who choose to remain [7]. Those issues must be addressed to allow EM in Ireland to become a more attractive specialty and to improve recruitment and retention of doctors into EM. The fact that Irish-trained doctors are opting to take up EM training in Australia indicates that other countries have solved some of these challenges that Irish EM currently faces. While emigration is a solution for individual trainees, it is not a solution for EM in Ireland [8].

Further research should be conducted with EM trainees in Ireland to investigate their satisfaction and to establish what would encourage them to remain in the specialty in the longer term. The findings can inform changes to the Irish EM training programme in order to retain trainees and ensure a future medical workforce in Irish EDs.

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**Authors' contributions** JP, NH, CMcD, and EMD planned the study. JP and CMcD conducted the data collection and JP and NH the data analysis. JP prepared all drafts and redrafts of the paper. NH, CMcD, and EMD provided editorial comment on the draft versions. All authors have read and approved the final manuscript.

### Compliance with ethical standards

The study was conducted in February 2016 with ethical approval from the Royal College of Surgeons in Ireland.

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