



Scottish hospitals will fail to attract consultants if contract issues are not addressed

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The Royal College of Physicians and Surgeons of Glasgow fully supports the STEP campaign launched today by the Royal College of Emergency Medicine (RCEM) to address the challenges facing emergency departments in Scottish hospitals.

RCEM has rightly identified the four key interdependent issues that need to be addressed.

Step 1 - The delivery of safe and sustainable staffing levels - is a particular challenge. A commitment from the Scottish Government to fund more consultant posts is welcome, although it is not clear from where these posts will be filled. The 9/1 contracts, which many emergency department consultants have been appointed on over the last four years, are unattractive to potential job candidates either within Scotland or in the rest of the UK as they limit the allocated training time to just four hours per week (i.e. one Supporting Professional Activity (SPA)).

One of the reasons for trainees leaving this service is seeing consultants stretched and being restricted from completing key supporting professional activities, which add to the quality of the service they deliver and their job satisfaction. While employing greater numbers of Specialty and Associate Specialist (SAS) doctors and increasing recruitment from outside the UK may help to some degree, recruitment issues also exist with these groups

Steps 2, 3 and 4 are also key and achieving each would significantly contribute to improvement in the care of patients and the functioning of emergency departments. Providing consultants with adequate time for SPAs would enable them to contribute to the debate on unfavourable working conditions, exit block and the co-location of primary care facilities all highlighted in the STEP campaign.

The harm done to patients by exit block is a shocking statistic and a root and branch review of this and patient flows through the hospital is essential. Although the problem here is not just about more beds, there is little doubt that the progressive reduction in hospital beds over the past ten years and longer, without due consideration for the progressive frail and elderly population is a factor.

We have seen unprecedented pressure on emergency departments this winter despite the absence of a severe winter or flu epidemic. Immediate action is required and the RCEM Scotland STEP campaign provides direction in addressing the issues.