



PractitionerHealth
LOOKING AFTER YOUR WELLBEING IN CONFIDENCE

ANNUAL REPORT

2022



CHAIRMAN'S REPORT

Professor Frank Murray - Chairman Practitioner Health

Dear Colleagues, I am very pleased to introduce the 2022 Annual Report of Practitioner Health. The programme, which was launched in September 2015, has continued to expand with a steady increase in the numbers of practitioners in Medicine, Dentistry and Pharmacy availing of the service. Our experience confirms the need for an independent, discrete, designated, confidential programme for practitioners who are facing health difficulties. Moreover, we recognise the ongoing need to raise awareness of the service so that practitioners, their families and concerned colleagues will know how to access help in a time of crisis.

We are Charity Regulator compliant with audited accounts submitted annually.

On behalf of my fellow Trustees, I would like to take this opportunity to thank 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 our work through signed Memoranda of Understanding.

I would like to acknowledge the outstanding commitment and skills of the team delivering the service, so ably led by Dr Íde Delargy.

Professor Frank Murray
Chairman, PHMP



MEDICAL DIRECTOR'S REPORT

Dr Íde Delargy - Medical Director Practitioner Health

I am pleased to report on the work of Practitioner Health (PH) for 2022. This has been another busy year with the demand for the PH growing steadily year on year. The service we provide focuses on supporting practitioners who may be struggling for a range of different reasons. These range from struggles with managing day to day, to more severe mental health and substance use issues. Doctors, dentists and pharmacists are trained to offer health advice and treatment to others and when they are struggling themselves, there is often a sense of shame and stigma in having to admit a problem. In addition, practitioners can often find it difficult to access confidential independent assistance, especially when suffering with a mental health or substance use disorder. Our aim is to ensure that each practitioner who seeks help can either continue to work if it is safe to do so, or can return to work following a period of recuperation and when well enough to do so. Our service is compassionate, non-judgmental and most of all is confidential which practitioners really appreciate.

Practitioner Health is a not-for-profit charity and is registered with and fully compliant with all the requirements laid out by the Charities Regulator. We are fortunate to have an excellent Board of Trustees who are all experienced in healthcare and are committed to the work undertaken by Practitioner Health. Without the commitment and expertise of this dedicated Board, the programme simply could not function.

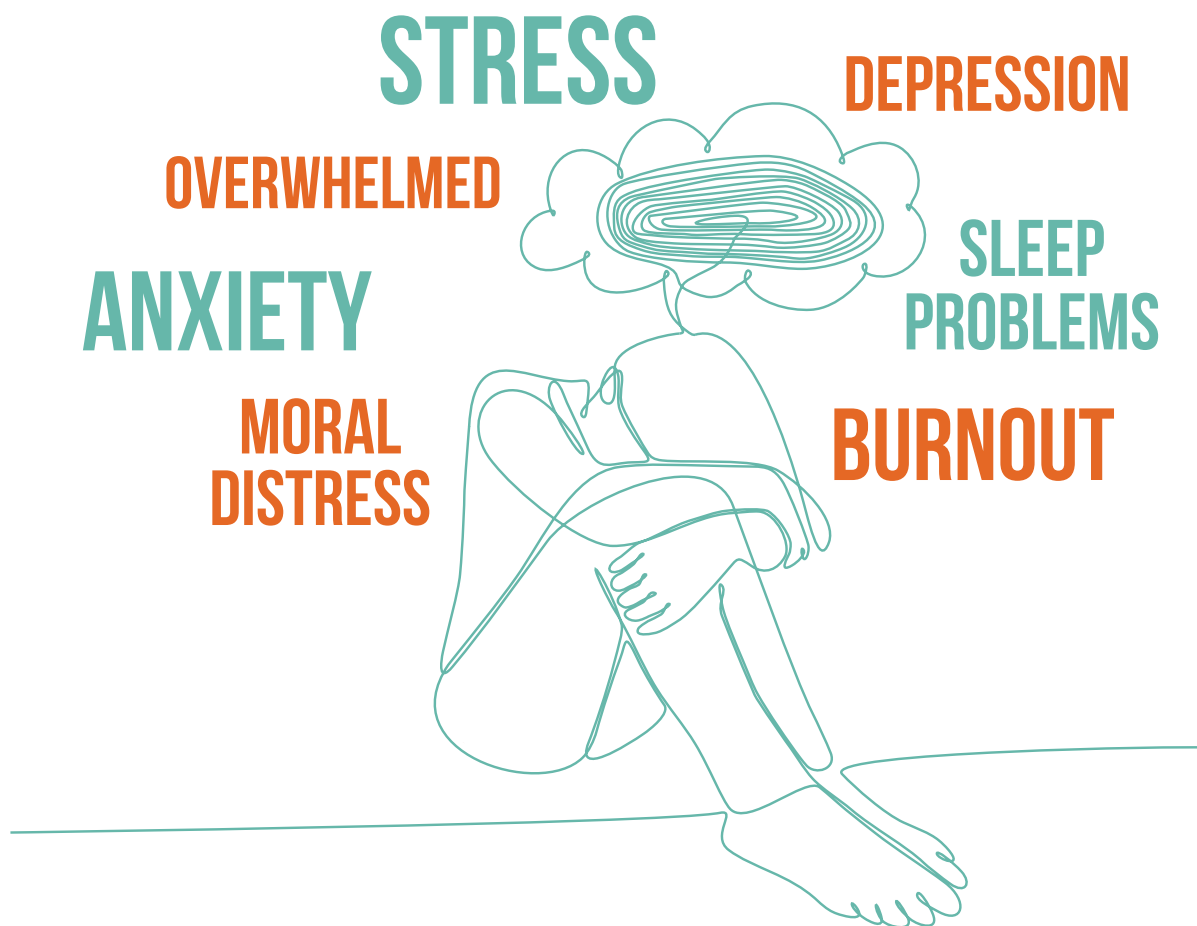
We continue to raise awareness of the service and what we provide. Our aim is that every doctor, dentist, and pharmacist should know that the service exists and the pathways to accessing help. Most practitioners will never need our service, but they may be in a position to direct a colleague to seek help should the need arise. We strongly advocate that all practitioners have their own GP who in turn can refer the individual to PH as necessary.

Confidentiality is a cornerstone of the programme. Practitioners can be assured of the highest integrity and confidentiality in their interactions with the PH. Confidentiality is fully assured for all practitioners who either refer themselves or are referred to us by an outside party. We are a fully independent organisation and will manage all patients discretely at arm's length from regulatory bodies, as long as the practitioner does not constitute a danger to the public.

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 issue which causes somebody to present. In general, it is a combination of factors which precipitate 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 high in this group. The service recognises that practitioners are often slow to seek help, even in the most extreme circumstances and we also recognise that sourcing 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 remain in work or return to work in a healthier frame of mind.



ANALYSIS OF PRACTITIONER HEALTH PATIENTS 2022

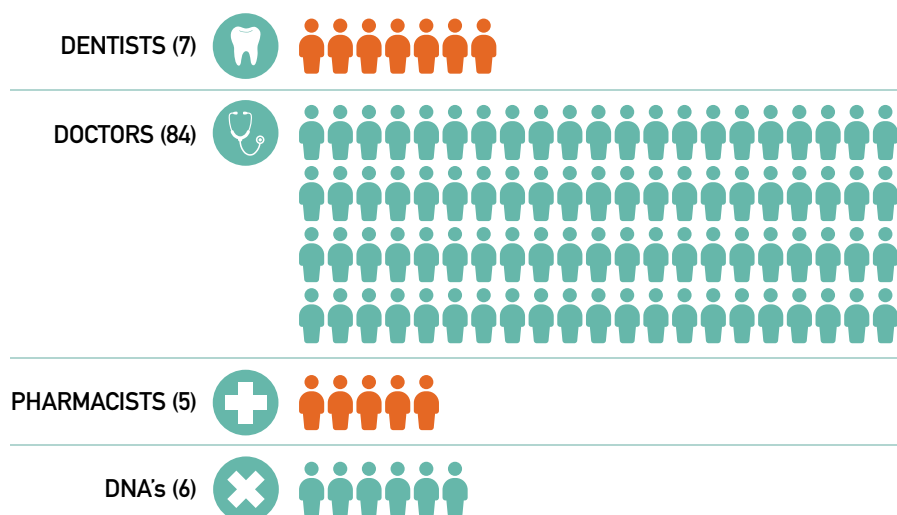
There were 102 new presentations to PH in 2022. In addition, 7 practitioners who had previously attended the programme re-engaged. Each person was assessed by one of the doctors on the PH team and a care plan is agreed with them. A range of treatment options is offered, including psychological supports, medication management, inpatient treatment or onward referral as appropriate to the individual's needs. Six sessions of psychological support are offered in the first instance, free of charge. Depending on the financial needs of the patient further complimentary sessions may be offered.

OVERALL PRESENTATIONS 2022

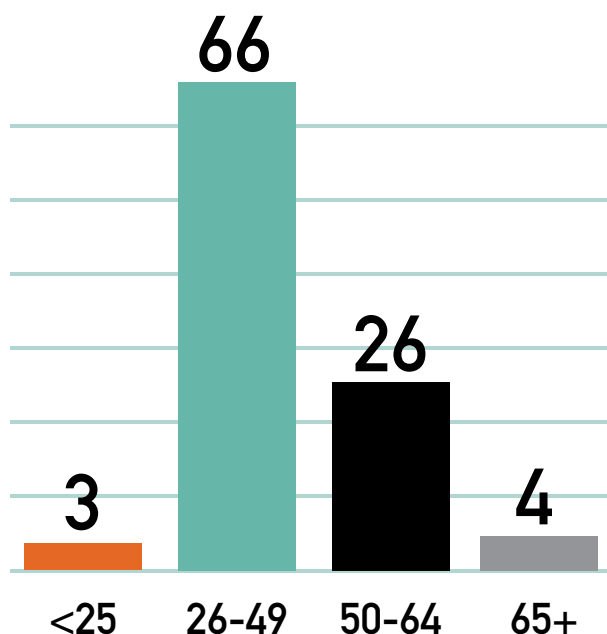


NEW PRESENTATIONS 2022

OCCUPATION



AGE RANGE



3 ages unknown as the practitioner did not proceed to initial assessment and follow up.

GENDER



STAGE IN CAREER

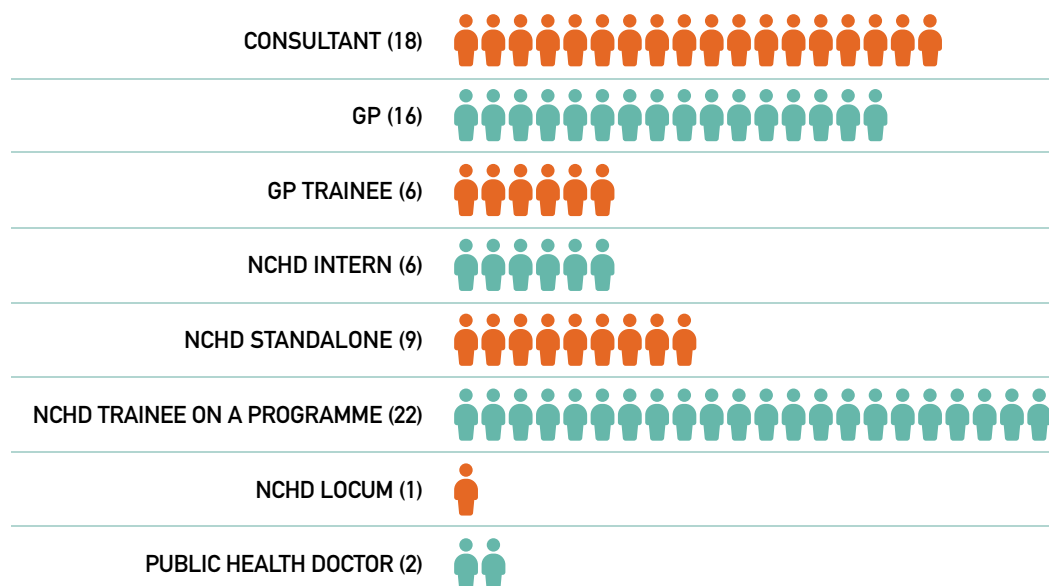
As in previous years, the majority of patients seen were at an early stage in their career, either at intern or trainee stage. Some young practitioners seek the support of the confidential programme, despite the range of supports provided by the training schemes, the intern support programme and Occupational Health programmes. Furthermore, a substantial number of more senior clinicians such as GPs and consultants also sought out the help of the PH programme.

The typical medicine referral was young, female, a GP trainee or other NCHD.



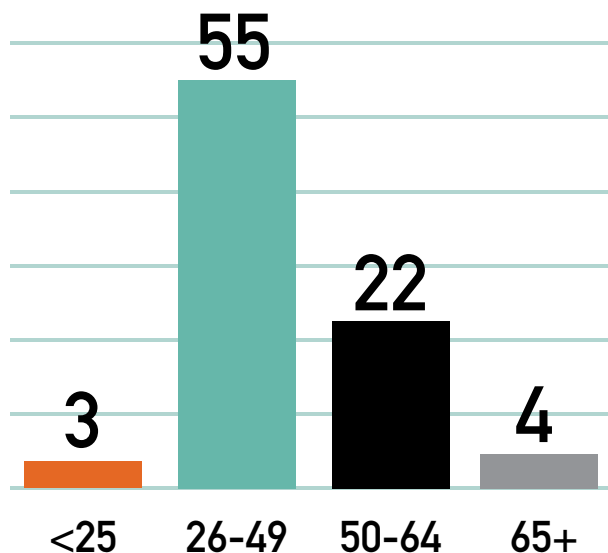
NEW DOCTOR REFERRALS 2022

STAGE IN CAREER

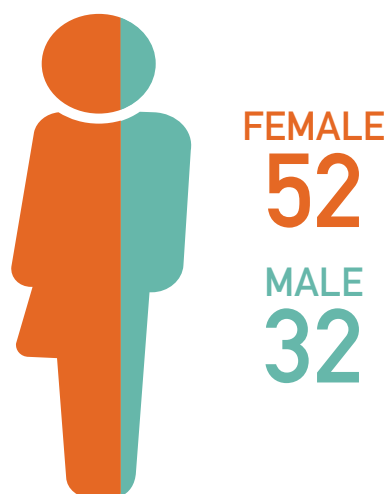


* 4 doctors contacted the service but did not proceed to initial assessment and follow up.

AGE RANGE



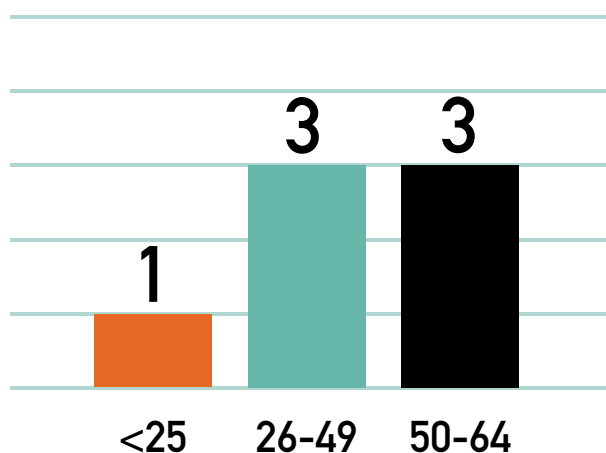
GENDER



NEW DENTIST REFERRALS 2022

As we have experienced in previous years, the number of dentists presenting remains low relative to the number of dentists registered with the Dental Council. We are aware that studies suggest that dentists have a higher level of stress and mental health issues when compared to the general public and therefore our expectation would be that more dentists would present to the programme. Regular communication from the various dental bodies and the Irish Dental Association raises awareness about the programme and we suggest that this should continue.

AGE RANGE



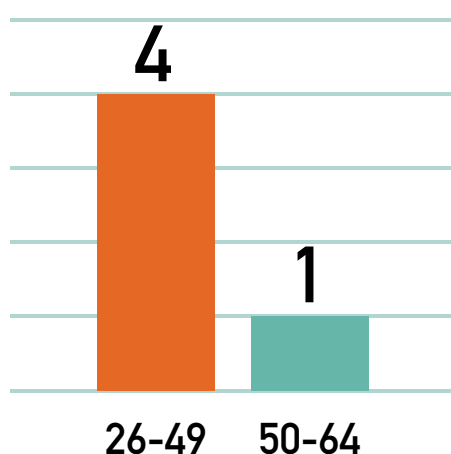
GENDER



NEW PHARMACIST REFERRALS 2022

There were fewer pharmacist presentations in 2022 than in previous years. It is unclear why this may be the case although we are conscious that there could be improved awareness about the programme. This is something we plan to address in 2023 with the pharmacy regulatory and representative bodies.

AGE RANGE



GENDER



SAMPLE PATIENTS

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.

■ PATIENT 1

KATIE - BST TRAINEE IN HER 30's

This young lady attended due to anxiety, a sensation of being overwhelmed and exhaustion. On initial presentation, her intention was to quit medicine as she felt she had lost interest in her patients and was unable to focus. Katie felt that medicine had robbed her of her other interests; she felt too tired when she finished work every day and felt she had no energy left to pursue her hobbies. The prospect of trying to continue with exams, publications and years of being on call had become overwhelming. Early life experiences including episodes of bullying contributed to low self-esteem and poor coping strategies. We recommended a short pause from work to recover her energy and encouraged pro-wellbeing activities in the first instance. We also facilitated therapy so that Katie could build her self-esteem and resilience. Having seen Katie weekly after her initial referral and with supportive listening and encouragement, Katie recognised that her love of being a doctor had not disappeared and she felt able to re-engage positively in the workplace. She did not need to be medication and she returned to work feeling stronger in herself with ongoing support in place.

■ PATIENT 2

JOHN - A GP IN HIS MID 40's

John attended following a request for an urgent consultation. He was distressed, agitated and suicidal. He had become severely overwhelmed in recent weeks which was precipitated by personal stressors including the illness of a close family member. His stress was compounded by insomnia and he had become fixated on not being able to sleep. He had self-medicated with a variety of different medications and became even more agitated when none of these had worked. He was unwilling to attend A/E or his own GP (who was his practice colleague), as he felt ashamed and embarrassed about his situation. John was a cause for concern to PH due to his suicidal ideation. He was monitored and contacted daily, and a safety plan was put in place. He gradually improved with the help of mirtazapine which helped with both sleep and an underlying depression. After a period of four weeks out of work, John was able to return to work on a phased basis initially, and is now back to his full-time role, healthy and well.

■ PATIENT 3

CONOR - DENTIST IN HIS 50's

Conor is an experienced dental practitioner who was going through a period of questioning his ability to practice and was doubting himself in terms of his commitment to dentistry. He was isolating himself at home as well as wakening early and ruminating about the day ahead. Conor had perfectionistic traits, which resulted in him being irritable and frustrated with colleagues at work. He also found it difficult to delegate tasks to others. At home he was isolating himself and was moody. His wife became concerned

and suggested he attend Practitioner Health. Following our assessment and intervention, lifestyle changes were recommended as well as encouraging him to address his perfectionistic tendencies. Conor made good progress and was able to slowly make the changes he needed to. His wife was involved in his care plan from the start and along with Conor, she reports a much-improved outlook on life and he is now happy to continue in dentistry.

■ PATIENT 4

PAULA - PHARMACIST IN HER 50's

Paula is a self-employed pharmacist who initially presented reporting that her mind was racing all the time, she was feeling increasingly overwhelmed and felt unable to do her job. She was working long hours as she owned her own pharmacy, and found it impossible to get locum support. Paula had been diagnosed some years previously with a significant mental health issue, but had been lost to follow up with her psychiatrist who had recently retired. In addition she was not registered with a GP. She had continued the medications her treating psychiatrist had prescribed for her at the time, but Paula was self-medicating and taking the medications from her own pharmacy. A colleague became aware of this and recommended she contact Practitioner Health to get the mental health advice and support she required. Paula had a number of risk factors in her past medical history including hospital admissions for depression and alcohol use disorder. She was in crisis on presentation with significant mood cycling. Her underlying condition was inadequately treated with no monitoring or follow up in place. It was essential that she stopped working immediately as her mental health was not compatible with good patient care. She was seen by our psychiatrist as an interim until a local community psychiatry appointment could be arranged. She was supported in finding a GP who would monitor her bloods and her physical health pending an appointment with the mental health services. Paula followed the recommendations of PH and her mental health steadily improved. She is now back working and is happier and more stable in herself. She will continue to need ongoing support from PH for the foreseeable future.

■ PATIENT 5

SOPHIE – CONSULTANT IN HER 40's

Sophie was referred to PH by her Occupational Health consultant. Having been a hugely resilient person, she was now presenting with symptoms suggestive of burnout. She had broken down in front of patients and other staff members on a couple of occasions. This was most out of character for her and she recognised she needed some help. At initial assessment, it emerged that Sophie had been feeling very compromised, due to what she felt was a poor standard of care in the department in which she worked. She was concerned about staffing levels and that due to the volume of work, patients were having to wait hours for treatment. She had raised her concerns with management and not only did she feel not heard but she was being targeted for speaking up. Sophie was struggling with this as she does not like conflict. In addition, a complaint had been made to the Medical Council by the family of a patient who had had a fatal adverse event. She had not been directly involved with this case but was named as one of the doctors responsible. The complaint was causing her anguish and was contributing to insomnia and rumination. Following a short break from work as well as supportive listening and reassurances, Sophie was able to gain perspective on her role and re-gain her resilience.

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

COMPASSIONATE SELF-CARE

Healthcare practitioners have been through a difficult time with Covid-19 and the seemingly endless demands of providing care to others. This can take its toll on all of us and particularly when we go through stressful times, our ability to self-care can be compromised. Feeling of being overwhelmed as well as negative ruminative, self-critical thoughts can predominate at times like this. Taking time to attend to our own needs and developing healthy lifestyle routines is of vital importance. Getting good sleep as well as regular exercise and attention to healthy eating helps build resilience which will stand us in good stead when we go through difficult times. This is a message clinicians can sometimes neglect – it applies to others but not to us! It is noticeable that many practitioners who attend our service have lost sight of these basic principles of wellbeing – a reminder is often the first step to recovery.

COPING WITH ADVERSE EVENTS

Adverse events with unfortunate bad outcomes for patients are a feature of medical practice. Such events can have significant negative impact on their mental health and functioning of the practitioner involved. Feelings of inadequacy, guilt, shame, and a sense of worthlessness can be accentuated with rumination and replaying of the event. It can affect some practitioners in their ability to function well and continue to look after their patients. These feelings can also lead to a feeling of being burned out and a lack of interest in continuing in medicine. We notice that some practitioners who attend our service may have experienced such an event many years ago, but these lingering thoughts of inadequacy and guilt can be difficult to shake off and can contribute to an underlying depression and anxiety. In these circumstances, supportive care is essential for someone experiencing these feelings and each practitioner needs to be supported sensitively and carefully particularly if an individual has other underlying vulnerabilities.

MORAL INJURY

Many of our clinicians work in a difficult healthcare environment with inadequate resources, and inadequate staffing levels. This can sometimes result in patient care being compromised. Feeling powerless to change this is a challenging situation for the clinician and while some can take up an advocacy role in these circumstances, others can become pessimistic and cynical leading to burnout. Thoughts of quitting medicine can be quite prevalent in this cohort and part of the recovery process is to provide an empathic listening ear. It is regretful that some may feel their only option is to leave medicine but with careful counselling many can reframe their thoughts and focus on the positive contribution they can make for their patients.

PATIENT FEEDBACK TO PRACTITIONER HEALTH

"I know I would not be here if I didn't get the help from Practitioner Health when I did. I am so grateful for this service. I just wonder why more people don't know about it?"

"I just want to thank you for all your time and hard work. You helped me through a really tough time, and I am very grateful for your kind help".

"After wasting years of my life, I can now start living thanks to the excellent work that you do".

"A massive thank you for making patients safe by making physicians safe. Thank you for all the work that you do, it is much appreciated".

"The counselling and support I received from your service was immense. I wish I had availed of this years ago and I could have saved myself a lot of hardship".

"I now realise how I used substances and food to make feel OK. I have learned invaluable insights and am now well on the way to a much healthier life. Thank you so much for the work that you do".

"I didn't think I could go on in medicine the way I was feeling. Slowly I have regained my interest in providing care to my patients and have learned to live a healthier lifestyle. I think I am better equipped now to deal with whatever challenges come my way".



THE BOARD OF PH 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	IRISH MEDICAL ORGANISATION
CLANWILLIAM HEALTH	IRISH COLLEGE OF OPHTHALMOLOGISTS
COLLEGE OF ANAESTHESIOLOGY IRELAND	IRISH PHARMACY UNION
COLLEGE OF PSYCHIATRY	KILDARE AND MERRION CLINICAL SOCIETIES
DENTAL COUNCIL	MEDICAL PROTECTION SOCIETY AND DENTAL PROTECTION
DENTAL BENEVOLENT FUND	MEDISEC, NATIONAL DOCTOR TRAINING PROGRAMME
DENTAL HOSPITAL	SHEPPARD TRUST
FACULTY OF OBSTETRICS AND GYNAECOLOGY	SICK DOCTOR TRUST
FACULTY OF RADIOLOGY	ST PATRICKS HOSPITAL (DEAN CLINIC)
HSE/NDTP	ROYAL COLLEGE PHYSICIANS OF IRELAND
IRISH COLLEGE OF GENERAL PRACTITIONERS	ROYAL COLLEGE SURGEONS IN IRELAND
IRISH DENTAL ASSOCIATION	ROYAL MEDICAL BENEVOLENT FUND
IRISH HOSPITAL CONSULTANTS ASSOCIATION	
IRISH MEDICAL COUNCIL	

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 Ms Sarah Keegan and Ms Katherine Madden 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.

PROF FRANK MURRAY CHAIRMAN	MR HUGH KANE TRUSTEE
PROF FREDDIE WOOD TRUSTEE	DR MUIRIS HOUSTON TRUSTEE
MS SIOBHAN KELLY HONORARY SECRETARY	DR NOEL KAVANAGH TRUSTEE
DR BARNEY MURPHY TRUSTEE	MR JULIAN SMITH TRUSTEE
MR FINTAN HOURIHAN TRUSTEE	MR JOHN O'CONNOR HONORARY TREASURER
MR ANTHONY OWENS TRUSTEE	MS NOELEEN HARVEY TRUSTEE

REFERENCE AND ADMINISTRATIVE DETAILS

Name	Practitioner Health
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: 085 760 1274

Email: confidential@practitionerhealth.ie

www.practitionerhealth.ie

RCN: 20200787 | CRO: 529820