



# BMA

Northern Ireland

## **A manifesto for health** BMA Northern Ireland 2022



British Medical Association  
[bma.org.uk](https://www.bma.org.uk)

**The BMA is a trade union and professional association representing and negotiating on behalf of all doctors in the UK. A leading voice advocating for outstanding health care and a healthy population. An association providing members with excellent individual services and support throughout their lives.**

We look after doctors so they can look after you.

## Introduction – Dr Tom Black



**Dr Tom Black**  
BMA NI Council chair

We all know the health system in Northern Ireland is under significant pressure. We are struggling to deliver timely, high quality and safe services to the population. General practices and hospital sites in Northern Ireland continue to experience escalating levels of need for their services against a backdrop of a failure to transform the health service to ensure its sustainability. Waiting lists are at an all-time high and we have an exhausted and burnt-out workforce.

The pandemic has certainly brought many of these issues into sharp relief, but the shortcomings of the system and the subsequent pressures on the service and staff predated Covid-19.

To be able to tackle this backlog and rebuild and transform the health service for the future, we need to ensure that medicine continues to attract new doctors and crucially to maintain the doctors already working in the service. Northern Ireland does not look like an attractive place for doctors to work. Doctors need to feel valued, and their terms and conditions need to reflect this.

The possibility of an individual duty of candour with criminal sanctions being introduced in Northern Ireland adds to the pressure doctors face.

Political instability is a further threat to our health service. We have lost the chance to develop a three-year budgeting and planning process and have lost out on additional funding for health.

Health must be prioritised in the next mandate.

# Supporting the medical workforce

**As we move out of the pandemic, we can see the additional pressures Covid-19 has put on staff who were already experiencing workload pressures prior to 2020. Now, more than ever before, we need to value our workforce and provide a safe and supportive environment for them to work in. They need time to recover from the most two challenging years they have ever worked through. We must ensure services are in place to protect their physical and mental health.**

The Department of Health needs to ensure that doctors are paid fairly for the work they do; this will encourage experienced clinicians to stay in employment and attract doctors from other areas to fill the large number of vacancies in Northern Ireland.

## **We are calling on the Department of Health to:**

- Introduce pension mitigations with immediate effect including employer pension contribution recycling and an Annual Allowance compensation scheme, recognising the additional work required to address Covid-19 pressures. We are also calling for maintenance of pension benefits introduced in Northern Ireland. When doctors are forced to opt out of the scheme to limit their pension growth, they lose dependents' benefits and life insurance. These should be maintained.
- Address historic sub-inflationary pay rises for doctors and commit to annual pay rises that are above inflation and are implemented early in the financial year.
- Reintroduce clinical excellence awards and immediately run a new round of awards.
- Prioritise their commitment to appointing a SAS associate dean
- Provide sustainable and timely access for doctors to support services such as psychological support
- Commit to proper medical workforce planning to ensure there are enough doctors to cover rotas and avoid over reliance on a small number of doctors.

**44%** of doctors in Northern Ireland are planning to retire early



## Patient safety

**The issue of patient safety in Northern Ireland is a huge concern for BMA NI. The blame and sanction culture that currently operates must be replaced by an open and learning culture.**

### **BMA NI calls on the Northern Ireland Assembly to:**

- Introduce safe staffing legislation in the next mandate that includes the need for regular updates on workforce planning, reporting mechanisms and accountability.
- Safe staffing legislation must also define how vacancies are measured across health and social care so there is an accurate measure of true vacancy levels.
- Introduce an organisational duty of candour to challenge the existing blame culture and foster an environment of transparency, honesty and learning.

Our research found that in 2021 **291** consultant posts were unfilled, compared with **126** according to DoH statistics

**33%** of doctors we surveyed said they would retire early if a duty of candour with individual criminal sanctions was introduced in Northern Ireland





# Medical workforce planning

**Medical workforce planning means there will be the right number of doctors in GP practices, in hospitals and in the community to meet the increasingly complex health needs of the population.**

Despite numerous pieces of work on workforce planning, our current situation reflects the abject failure by the Department to effectively plan for the medical workforce we require. They have failed to consider the changing demographics of the medical workforce as well as that of the population. At its simplest, the necessary number of doctors across branches of practice and specialties have not been trained to meet the health needs of the population.

If workforce planning is not dealt with as a matter of urgency, waiting lists will continue to spiral out of control, staff will suffer from burnout in trying to cover rotas and it will be difficult to attract potential doctors into medicine.

## We are calling for:

- The Department to undertake proper medical workforce planning that ensures the correct number of doctors are being trained in the correct specialty. Workforce plans must use population data, be future proofed and should aim to promote and value all grades of doctor including the new SAS specialist role.
- The Executive to make a permanent commitment to fund the second medical school at Magee, including any necessary recurrent funding.
- A review into the fees and costs associated with studying medicine and junior doctor training so that no-one is deterred from becoming a doctor due to cost.



# General practice

**General practice remains the most cost-effective way of delivering high quality care to patients close to home. We have already seen the steady demise of out of hours provision due to the lack of workforce and this is now affecting in-hours services as there are just not enough GPs to fill vacancies and provide locum cover for sickness and holiday leave.**

The pandemic has added pressure to GPs, alongside an inaccurate and damaging narrative that they are 'closed' to seeing patients.

## **BMA NI is calling for:**

- An urgent increase in GP training numbers and a commitment to annually review the number of doctors in training to ensure numbers reflect population requirements.
- Funding for multi-Disciplinary Teams (MDTs) so they can be implemented across all areas to ensure equitable access to the services MDTs can provide to all patients in Northern Ireland.
- GP premises to be improved through proper funding and infrastructure planning to enable practices to house MDTs and attract new GPs to work in them.
- A state backed indemnity reimbursement scheme such as is available in the other nations, to attract new GPs and to ensure parity with GPs in other nations.





# Population health

**Northern Ireland must move towards a population health model for planning services. This is an approach that aims to improve physical and mental health outcomes, promote wellbeing and reduce health inequalities across an entire population. This shift from a commissioning model to a planning model, should ensure a more coherent approach to addressing the health of the Northern Ireland population.**

A key component of population health is addressing health inequalities. Persistent inequalities remain entrenched in certain sections of communities in Northern Ireland with people living in more deprived areas five times more likely to suffer drug related deaths. Smoking during pregnancy, alcoholism and teenage births are also significantly higher in poorer communities.

### **BMA NI is calling for:**

- The planning model for delivering population health to be properly resourced so it is implemented effectively.
- Health impact assessments to be part of the normal process for all new legislation across all government departments.
- The introduction of minimum unit pricing legislation.
- Properly resourced and sustainable mental health services for the population.
- Climate change to be addressed to prevent further health inequalities.





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