

Endocrinology

Table 1.1 outlines the current number and ratio of consultant endocrinologists per 100,000 of the population in Ireland. Included in this table are the projected numbers of specialists per 100,000 of the population in 2024, should the current ratio remain static at the 2014 level. Table 1.1 also includes the research informed range of specialists per head of population as per expert stakeholder perspectives, the Hanly (2003) recommendations and the ratios in place, projected and/or recommended in comparable healthcare jurisdictions.

Table 1.1 Endocrinology Consultant Posts (Private and Public) 2014-2024

2014		2024*		Research informed range of specialists per head of population to 2024 **	
N	Ratio per 100,000 pop	N	Ratio per 100,000 pop	N	Ratio per 100,000 pop
41 (35 WTE)	.9	44 (38 WTE)	.9	80 - 95 (69 - 81 WTE)	1.6 - 1.9

* Accounting for population growth and an unchanged ratio of consultants

** The recommendation is based on information in Table 4.4.2 and represents a range from the lowest to the highest ratio considered

Table 1.2 Background Information

Hanly (2003)	Hanly (2003) recommended a ratio of 1: 58,000 consultant endocrinologists per head of population to achieve a consultant-provided service and to comply with the European Working Time Directive (EWTD) in 2013. This represents approximately 1.7 consultants per 100,000 of the population. Using CSO population projections (CSO, 2011), we estimate the recommended ratio to equate to 80 consultant endocrinologists today and approximately 86 consultant endocrinologists in 2024 approximately. Using a WTE rate of .86, this would equate to 69 and 74 whole-time equivalent (WTE) consultants in 2014 and 2024 respectively.
Royal College of Physicians of Ireland (RCPI), Faculty of Medicine/Clinical Programme	<p>There are 41 consultants in HSE hospitals around the country. The majority of these consultants provide a significant commitment (up to 50%) to the General Medicine workload of their respective hospitals. In addition, a minority of consultants hold joint academic appointments with the universities affiliated with teaching hospitals. On account of this, the actual WTE consultant commitment to the specialty is likely to be much less than 41 WTE. All but a maximum of one or two are under 55 years of age, 11 are female and 30 are male. Their geographical location per HSE region is as follows; 13 in Dublin Mid-Leinster, 10 in Dublin North East, 11 in the West, and 7 in the South. There is a need for more consultant endocrinologists in the country. In terms of training, numbers should be increased by 2 – 4. There are several posts in many of the major teaching hospitals that have been approved for training but have not been filled by SpRs for the past few years. It is difficult to predict what impact the new hospital groups will have on the need for endocrinologists in Ireland.</p> <p>The HSE through the Diabetes Clinical Programme is advocating a more integrated approach to the delivery of diabetes care in Ireland, recommending that patients with ‘uncomplicated’ type 2 diabetes receive their care exclusively from their General Practitioner with ‘complicated’ patients and certain patient groups such as patients with diabetes in pregnancy, receiving care exclusively from the (hospital-based) specialist team. All other patients (not fitting into either of these categories) are recommended to receive their care jointly between the hospital and primary care. To date this Integrated Diabetes Care Programme has not been met with approval from GP bodies and therefore its roll-out and potential impact on workforce planning has not been possible to assess. It is likely that the increasing prevalence of diabetes will mean that (even allowing for the above model of care) considerably more endocrinologists will be required in Ireland over</p>

	the next 10 years. The reality is a 200% increase in diabetes incidence in the UK in the last 20 years and a 500% increase in incidence of Type 2 diabetes mellitus in those less than 40 years in the same period. Complicated patients with diabetes in hospital will live longer requiring more diabetes specialist input. Community diabetes consultant posts will be required to support primary care in managing huge numbers. These should combine with specialists in the medical management of obesity.
United Kingdom – Royal College of Physicians	The 2011 Royal College of Physicians manpower survey identified 723 whole-time equivalent (WTE) consultant endocrinologists in the UK, representing WTE ratios of 1.1 per 100,000 in England, 1.5 in Scotland, 1.4 in Wales and 1.67 in Northern Ireland. This represents a small overall increase in WTE in the UK, from 1.04 in 2009 to 1.16 in 2011. The Royal College of Physicians recommend a workforce of 4 consultants per 250,000 population (1.6: 100,000) to be achieved by 2015. This recommendation is based on the prevalence of diabetes increasing at a rate of 0.3% per annum, outpatient work and direct clinical care programmed activities increasing also.
England – Centre for Workforce Intelligence	According to data from the National Health Service Information Centre census (NHS IC, 2011), 453 whole-time equivalent (474 headcount) consultants were employed in England as of September 2010. The supply of consultants in endocrinology and Diabetes Mellitus over the next ten years is forecast to increase to about 900 whole-time equivalent in 2020 (950 headcount), an average increase of 7.2 per cent annually. This equates to approximately 1.7 consultants per 100,000 of the population.
Australia	Australia will have too many endocrinologists by 2018 if current trends continue (Wood, 2012a). New doctors are predicted to continue to join the specialty faster and in greater numbers than the old ones bow out, leading gradually to a surplus over the next decade or so. By 2018, Australia will have 598 endocrinologists, but demand for just 572, representing a surplus of 26. By 2025, the surplus is predicted to be 29. However, stakeholders regard these projections of Health Workforce Australia to have underestimated future demand because they were based on current Medicare and hospital separations data and therefore failed to account for the rising rates of diabetes. The Australian Institute of Health and Welfare (2014) estimate that there were 438 specialists working in endocrinology in 2012 (whereby endocrinology was their main specialism). This equates to a ratio of 1.9 per 100,000 of the population for 2012 (the population of Australia in 2012 was 22.68 million).

Notes:

- Endocrinology: 35 specialists were employed in the public sector (excluding specified purpose contract employees and those on career breaks). Source: HSE Workforce Planning, Analysis, & Informatics Unit, Dec 2013
- Endocrinology: 6 specialists were estimated to be employed in the private sector. Source: Medical Directory; Google and hospital websites
- WTE rate used herein is .86. Source: HSE Workforce Planning, Analysis, & Informatics Unit, Dec 2013
- Population 2014 is projected to be 4,626,423 using the M2F2 scenario CSO (2011)
- Population 2024 is projected to be 4,979,921 using the M2F2 scenario CSO (2011)
- Information in Table 1.2 does not necessarily represent the views of HSE-NDTP