Staff Support for the Health Service Executive (HSE) Global Health Programme

Abstract:
G Fitzpatrick, D Weaklum, M Boland, M Fitzgerald
Department of Public Health Medicine, Stewarts Hospital, Palmerstown, Dublin 22

The Global Health programme (GHP) within the Health Service Executive (HSE) aims to improve health in developing countries by creating partnerships between Irish and developing world healthcare institutions. To ascertain the level of interest among HSE staff for the GHP a web-based survey was conducted. 1,028 responses were received. Medical professionals, 202 (27.7%) composed the largest category of respondents. The majority, 503 (69.3%) of respondents wished to actively participate in the GHP. 237 (23.1%) staff had previous experience of working in the developing world. This survey highlighted a number of themes respondents considered important for successful partnerships including: reciprocal staff exchange, joint scientific research, the avoidance of brain drain and utilising the Internet to link institutions. Less than 1% (2/203) of comments expressed a negative view of the GHP.

Introduction
In 2007 the HSE carried out a survey of its staff to investigate their experience of working in the developing world. A comprehensive list of contact details for non-consultant hospital doctors (NCHD’s) was not available. A questionnaire was developed and piloted by the survey team. An email was sent to all individuals with HSE email addresses inviting them to participate in the survey through Survey Monkey. All hospitals were requested to circulate the message through their email lists. Nurses and doctors were invited to participate through messages from the Irish Nurses and Midwives Organisation and the Royal College of Physicians of Ireland. There were nine questions in the survey. Questions one, two and three focused on employee’s previous developing world experience. Questions four and five investigated if healthcare organisations in Ireland provided support for developing countries. Question six asked if staff would be interested in becoming involved with the ESTHER programme and questions seven and eight requested respondents to contact details and job classification. Question nine invited staff to provide comments on how they believe constructive links could be created between Irish and developing world institutions. Comments were analysed qualitatively and organised according to themes that emerged.

Results
The survey prompted 1,028 responses.

Profile and experience of respondents
A total of 729 respondents provided details of their staff category, Table 1. 237 (23.1%) employees had experience of working on aid projects mostly through Non Governmental Organisations (117/34.7%), Table 2. Employees duration of experience varied from less than 12 months (131/41.6%) to greater than 5 years (57/14.5%).

Current support provided by Irish institutions
59.3% (610) of respondents did not know if their workplace provided support to developing countries while 26.4% (271) of staff confirmed their employer grants no assistance. Only 14.3% (147) of employees indicated their institution offers support to developing countries. The most common format of this support was the donation of equipment (50.8%) followed by the provision of healthcare (27.7%) and the training of staff (21.5%). The majority of staff (503/69.3%) wished to work on projects that allowed Irish healthcare institutions partner with similar organisations in the developing world.

General comments
A total of 203 staff submitted suggestions for creating and maintaining partnerships. Comments covered themes including: the formal twinning of institutions, using internet resources to strengthen partnerships, fundraising, reciprocal exchange of staff between organisations, donation of relevant equipment, joint scientific research, learning from NGOs’ experience and the provision of managerial support to allow staff from Irish institutions obtain leave to work in partner institutions. Two out of the 203 (<1%) comments expressed a negative attitude towards forming partnerships through the ESTHER alliance.

Discussion
As a consequence of the methodology selected, the survey was not representative of all staff working within the health service. Unfortunately it was not possible to access the contact details of those working within general practice in Ireland. A comprehensive list of contact details for non-consultant hospital doctors (NCHD’s) was not available. A large percentage of these NCHDs are non-EU nationals therefore they are potentially a rich source of information for future progress depends on strong relationships built on mutual respect over time. The challenge facing the HSE is how to channel this staff experience into partnerships that support the provision of evidenced based healthcare to those at greatest need.

Correspondence: G Fitzpatrick
Department of Public Health Medicine, Dr Steevens Hospital, Stevens Lane, Dublin 8
Email: gabriel.fitzpatrick@gmail.com

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References


