## Doctors return to table but call for extra facilities, not just more staff

By **Kate Chambré** 

THE protracted negotia-tions with hospital consul-tants over new contracts may finally be nearing a con-

may many be nearing a conclusion with the agreement of a new timetable yesterday. The chairman of the talks, Mark Connaughton, has been liaising with consultant organisations and the Health Service Executive (HSE) on agreeing an agenda agenda.

genda. Both consultant bodies – the Irish Hospital Consultants Association (IHCA) and the Irish Medical Organisation (IMO) – have agreed to return to the talks.

Now, under the new timeframe, Mr Connaughton has been asked to provide a progress report to Gov-ernment by February 27 and to pre-

#### 'Playing politics with patients'

sent a final, conclusive report by March 27.

No progress has been made in the talks since 2005.

The Government wants to end 'Category Two' contracts, which allow some consultants to care for both public and private patients. These can prove especially lucrative for the 600 or so consultants signed up to the agreement.

They earn up to e155,000 from their public salary but add significantly to this by treating private patients.

Ministers want to end this arrangement for new consultants.

The Government reaffirmed yesterday that the new contract should support equality of access to public hospitals, flexibility in working arrangements, consultant-delivered services, team-working by consultants, clinical directorships, and a clear commitment to

**Stalemate** is broken in row over consultant contracts

ter for Health Mary Harney said: Patients have to be admitted faster, to be seen by consultants faster, and to be discharged from hospital faster. "The Government is determined to have its pollcies implemented in respect of the hiring of new consultants on new terms, and the better organisation of services for patients in public hospitals. "The development of consultant-provided care will require substantial increases in the number of con-

sultant posts over the coming years.
'In excess of 1,500 additional con-sultants will be required in a fully m excess of 1,500 additional consultants will be required in a fully planned and properly budgeted way, integrated with service development, with a proportionate decrease in the number of non-consultant hospital doctors.

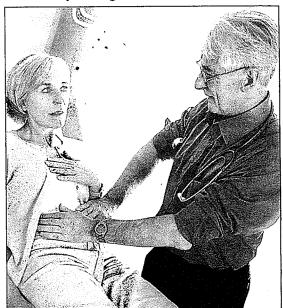
Assistant secretary general of the IHCA Donal Duffy told the Irish Daily Mail yesterday that while the organisation welcomed the plans to recruit the consultants, a lot

more still has to be done. 'We welcome the plans to recruit another 1,500 consultants because it is something we have been looking for since 1999.

'However, if the Minister is serious about her proposal then she must clearly explain when and how she is going to provide the operating theatres, outpatient clinics, nospital beds, community beds, intensive care units and staffing that are necessary to provide the patient care that these extra con-

sultants will need to deliver. There are consultants employed today who have none of these facilities. This is both professionally demor-allsing and a gross waste of taxpay-

allsing and a gross waste of texpay-ers' money. the Minister to give this crucial information is being dishonest with the electorate by leading them to believe that 1,500 extra consultants is a cure for all the ills of the health service. And this amounts to playing politics with patients,' he said.



Prognosis: 1,500 new consultants are no 'cure-all' without more beds

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