

UEG Week+ | Hospital in crisis

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UEG Week Copenhagen 2023

Presentation

October 15, 2023

A panel of gastroenterology leaders from Germany, UK, Netherlands, Lithuania, and the US discussed workforce crises across hospital systems, including severe nursing and physician shortages driven by retention failures, reimbursement distortions, post-Covid backlogs, and the challenge of attracting a new generation with different work-life expectations.

KEY POINTS

- The speaker reported that his German hospital employs 32 percent foreign nurses due to domestic recruitment failure, while the US panellist stated that 30 to 40 percent of nurses in his system are temporary travel nurses who move frequently, and the UK and Lithuanian speakers described similar retention crises affecting both nursing and medical staff.
- The UK panellist described advanced use of specialised nurses who prepare clinics and perform small procedures, making physicians more efficient, while the Nottingham speaker reported strong interest in a newly created neuro-gastroenterology nurse role; the Lithuanian speaker noted that Eastern European countries do not permit nurses to perform endoscopy due to physician concerns about market share and the potential for diagnostic cases to become interventional.
- The Netherlands speaker stated that the Covid backlog is fully resolved but current waiting times persist due to staff shortages, whereas the UK speaker reported that a pre-existing backlog was compounded by two years of reduced elective activity and the system remains in crisis; the Kansas speaker reported six to twelve month clinic backlogs, with some referrals from January seen in October after symptoms had resolved.
- The German speaker stated that reimbursement distortions have led to a hip and knee replacement rate seven times higher per capita than in the UK or Israel, a halving of endocrinology departments, and a doubling of neurosurgery and orthopaedic departments since 2003, and that private gastroenterologists perform colonoscopies but not gastroscopies because only the former are separately reimbursed.

- The US fellow panellist described mentorship at national meetings and procedural training as key attractions to gastroenterology, but noted that limited trainee exposure to endoscopy and the appeal of less on-call clinic-based specialities like rheumatology pose recruitment challenges, while the Dutch speaker cautioned that hyper-specialisation in procedures without managing co-morbidities risks making the work boring and patient care inferior.

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