



**Health Education East of England**  
**Directorate of Education and Quality**

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## **Report of the School of Paediatrics visit to Basildon 27<sup>th</sup> August 2013**

### **Visiting Team**

Dr Wilf Kelsall, HOS Paediatrics  
Dr Susan Rubin, Consultant Paediatrician  
Dr Ben Kyaw, Trainee Representative

### **Introduction**

This school re-visit was conducted to meet trainees as they completed their placement in Basildon. The visit was organised to meet trainees and follow up from my previous visit on the 1<sup>st</sup> March and a triggered visit to the department in December 2012 following concerns raised by the CQC and the East of England risk summit. Those previous reports had highlighted recommendations to the department and identified areas of progress that had already been made.

### **Meeting with Trainees**

We met a representative group of trainees that included Foundation, General Practice, and Paediatricians. I also received feedback by email in advance of the meeting. I was also able to review the recent GMC survey which highlighted some concerns around the access to regional teaching programmes and local education events. The trainees confirmed that a great deal of progress has been made and sustained over the last six months. The appointment of three new consultants has revitalised the department. Everyone, medical and nursing staff, were working together to deliver a high quality, much safer, and more efficient service. The expansion in consultant numbers has allowed a more robust consultant presence throughout the day and up to

and including the evening handovers. There is more enthusiasm in the department for teaching. The development of a timetable programme has been a significant advance. There are still some issues around all the advertised events occurring and sometimes because of workload it is difficult for trainees to attend all sessions. Trainees confirmed that there have been improvements to the departmental induction programme. Educational supervision occurs appropriately and workplace based assessments are undertaken without difficulty. All 10 trainees that we saw would recommend training in the department.

### **Departmental feedback from Dr Van Meijgaarden, Clinical Director and Dr Sam Mukherjee, Clinical Tutor**

Dr Van Meijgaarden confirmed that the department continues to make progress. She has been very pleased with the new consultant appointments, who have joined the department bringing additional special interests. The physical relocation of the four-bedded physical assessment unit to the Emergency Department has been a great success and streamlined the review of paediatric patients. The Trust is meeting the CQC targets of 98% of patients being seen within 1 hour of attendance. Nursing numbers have been increased. The appointment of a new senior nurse has been a great success. There is a supernumerary nurse on every shift. The department has plans that have been submitted to the Trust board to appoint additional acute/hybrid consultants with a reduction in the middle tier of trainees from nine to six.

### **Conclusions**

1. The meeting today confirmed that there has been a significant improvement in the quality and safety of the clinical service and training delivered in Basildon over the last 6 months.
2. Dr Van Meijgaarden and Dr Mukherjee continue to show excellent leadership in moving the department forward and are carrying their whole consultant body with them. The newly appointed consultants are settling in well and have delivered a new drive and enthusiasm to the department.
3. The realignment of paediatrics into a women's and children's division appears to have raised morale and streamlined management issues.
4. The co-location of the paediatric assessment unit to the Emergency department has worked well, improving the safety and efficiency of the service.
5. The teaching programme is much improved.
6. All trainees would recommend Basildon as a training department. Trainees are well supported by approachable consultants. They see an excellent range of clinical material.

## Recommendations

1. Access to and attendance in Outpatient clinics remains problematic for all trainees. Work is ongoing within the department to review rotas to allow better access.
2. The teaching programme needs further work to ensure that advertised events occur. A senior trainee should be encouraged to take on a role for organising teaching, perhaps with one of the newly appointed consultants.
3. The department needs to continue to work with the school of paediatrics regarding changes to the middle grade rota. The school supports a planned reduction in trainee numbers. There was some anxiety that a rota with only 6 middle grade doctors might reduce training opportunities. I would suggest that the plans are discussed with other departments such as Bury St Edmunds, Colchester, and Leicester, where acute consultants have been appointed for some time.
4. Rota issues and staffing shortages may continue for some time. It is important to ensure that any locums appointed do not detract from the experience of the substantive trainees for example taking them away from training opportunities on the neonatal unit.
5. The department should work with the Trust to ensure that issues around the payment of study leave costs are dealt with in a timely fashion.
6. The department should formalise the handover between the consultants of the week. Their changeover day is formally a Saturday. This does appear to put additional pressure on the weekend junior medical team. Formal consultant to consultant handover should take place on a Friday afternoon in advance of the weekend change.
7. The role of the senior trainee should be strengthened in the department to provide a conduit for communication between all trainees and the consultant body.
8. Training issues and a review of the trainee's progress should be minuted in faculty meetings attended by consultants.

We were very pleased with the progress that has been made in Basildon over the last six months. I will be recommending to the Dean that trainees continue to be placed in the department. We are pleased with the quality of training offered and the safety of the service delivered. I would be grateful to receive a written update on the above recommendations in 6 months' time. I would propose a further visit to Basildon in 12 months.

**Dictated by Dr Wilf Kelsall, Head of School of Paediatrics 27.08.13**

CC: Dr Susan Rubin, Consultant Paediatrician  
Dr Ben Kyaw, Trainee Representative