Luton & Dunstable University Hospital

Lewsey Rd, Luton, Bedford LU4 0DZ

Website: http://www.ldh.nhs.uk/

College Tutors: Dr Anne Ingram

Travel Information: Train/Tube to Luton Railway Station, the Hospital is located a 10 minute car/taxi journey, 14–18 minute bus ride or 1 hour walk away). Bus: Centre bus runs route number X31 between Luton Station/Town Centre and Flitwick, Toddington and Milton Keynes. It stops next to the hospital on Dunstable Road.

Car/Parking: Less than 5 minutes from M1 Junction 11. Staff car-parking is located at Faringdon Fields Car Park, off Calnwood Road and at the Breast Screening Car Park, off Lewsey Road. Both car parks are less than 5 minutes' walk to the hospital. Current staff car-parking charge is £1.20 per day.

Rota & Responsibilities:

No of Consultants: 13

Registrars: 9*-person rota

SHOs: 8-person rota (4 x ST1-3, 3 x GPST, 1 x FY2)

FY1: 1

*one of the registrars is based in community 9-5 but does on-call shifts in the hospital

Week	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
1	LD	LD	LD	LD	Off	Off	Off
2	AL	Clinic	Clinic	NWD	LD	LD	LD
3	NWD	NWD	Off	Off	Night	Night	Night
4	Off	Off	NWD	NWD	NWD	Off	Off
5	Nights	Nights	Nights	Nights	Off	Off	Off
6	Late	Late	Late	Late	Late	Off	Off
7	AL	AL	AL	AL	AL	Off	Off
8	AL	AL	Off	Off	Off	PAU W	PAU W
9	PAU	PAU	PAU	PAU	PAU	Off	Off

Week plan: (based on the current 9-person ST4+ rota, subject to variations)

LD: 8:30 – 21:30 \rightarrow Working on ward 24 or 25 and both after 17:30

LD W: 8:30 – 21:30 \rightarrow Both wards until 17:00 then wards and PAU. Hold on-call bleep 8:30-09:00 then 17:00-21:30

NWD: 8:30 – 17:00 \rightarrow Working on ward 24 or 25

Clinic: 9:00 – 16:30 → Observing/participating in paediatric clinics

Admin: Time allocated for writing Registrar clinic letters, audits and projects

Night: $20:30 - 9:30 \rightarrow$ Cover both wards and PAU. Hold the on-call bleep from 21:30

PAU: 9:00 – 17:00 \rightarrow Paediatric assessment until. Hold the on-call bleep until 14:30

PAU W: 09:00 – 17:00 \rightarrow PAU. Hold the on-call bleep.

Late: $14:30 - 22:30 \rightarrow PAU$. Hold the on-call bleep until 22:30

AL: Annual leave

Ward-based duties include: Seeing patients on ward-round , updating the hand-over list, discussions with tertiary hospitals, chasing results, organising referrals/investigations, clerking-in elective patients or direct-to-ward admissions, presenting patients in grand-round on Thursday afternoons, writing/updating discharge letters for ward patients, bloods/lumbar punctures/cannulas etc. for ward patients, writing and updating ward prescription charts, updating the in-patient growth charts every Wednesday

PAU-based duties include: Clerking and examining new patients (who have been referred by A&E/community/GP or those who have open access to the unit), accepting or re-directing referrals, bloods/lumbar punctures/cannulas etc. for PAU patients, writing PAU discharge letters, reviewing PAU patients seen by the SHOs, seeing planned PAU review patients (patients who have been booked in for a review at a pre-arranged time in the morning – maximum of 3 per day), chasing up results of patients who have been discharged and acting on them as necessary, answering the on-call bleep, attending arrest/emergency calls, helping in A&E when necessary.

The responsibility for most ward-based and PAU jobs is shared with the SHOs, depending on individual ability and availability

Department Strengths and reasons to join the L&D Team:

- Very supportive team of Consultants and nursing staff
- Interesting patient population with plenty of opportunity to gain experience of rare and unusual metabolic, genetic, endocrine and neurological conditions.
- Good access to clinics both in terms of observing and participating
- A variety of different shifts within the rota e.g. ward, assessment unit, clinics
- The college tutor/s regularly meet with trainees to gain feedback. Suggestions are listened to and where possible, changes are made.
- Excellent focus on safe practices; the department is well supported and has a strong focus on patient safety and timely follow-up. The recent introduction of SBAR, "huddles" and modification to the handover system has helped to improve patient safety and staff awareness.
- Well-designed and integrated computer systems. "ICE" allows access to past results, investigation reports and the writing/viewing of discharge letters. "Evolve" is used for the uploading and viewing of previous clinic letters and correspondence and includes other functions such as creating asthma discharge plans, echocardiogram request forms and plotting growth charts electronically. "BigHand" is a user-friendly dictation programme.
- Strong links with allied health professionals (physio team, dieticians) and the Paediatric Community Centre (Edwin Lobo Centre).

- There are a number of very experienced specialist paediatric nurses in areas including diabetes, cystic fibrosis, endocrinology, gastroenterology and epilepsy who are on-hand for advice, support and teaching.
- There is a very full and varied teaching programme which includes sessions with external consultants with specialist interests.
- Lots of support with exam revision and opportunities to support others with their preparation
- One or other of the two Paediatric Consultants with a special interest in diabetes is available 24-hours a day if any advice is required for management of a paediatric diabetic patient.
- Well organised induction
- We have a very well-organised and helpful rota co-ordinator (Carole Sloan <u>carole.sloan@ldh.nhs.uk</u>)

The doctors and the nursing staff have a very good relationship and a variety of social events are organised throughout the year which are always good fun.

Training and Teaching:

- Access to Paediatric and neonatal clinics including specialist clinics and clinics held by visiting consultants from GOSH
- Good opportunities for teaching juniors and medical students e.g. providing bedside teaching, observing juniors/students on PAU, assisting with medical student paediatric mock exams, running MRCPCH clinical exam revision sessions.
- Lots of encouragement and opportunities to participate in audits
- Lots of management roles available including teaching-rota organiser, rota co-ordinator, journal club facilitator, trainee representative and Morbidity & Mortality meeting co-ordinator. In addition, consultants may give you additional specific responsibilities e.g. improving the induction booklet, ensuring growth charts are updated etc.
- Chances to become involved in research and article writing. (Dr. Eisenhut in particular has lots of experience in this area and is always willing to help)
- Grand Round takes place every Thursday afternoon. It is a very useful exercise in patient management, communicating with other colleagues and clinical governance.
- Luton Hospital offers a range of useful trust-based courses including BLS, safe guarding level 1-3 training, stress-management courses etc.
- In addition to the teaching offered by the Paediatric Department, the Hospital itself offers some good opportunities for learning including the hospital-wide Grand Round every Tuesday lunchtime and regular "Schwartz Rounds" where a specific department presents ethical topics affecting their current/previous patients and everyone gets a chance to discuss the issues.
- There are chances to create and present presentations on completed audits, case studies of patients or on journal articles of interest.
- There are regular CATS study days where trainees discuss the patient's case up until the time of transfer and then one of the CATS doctors/nurses discusses what happened from that point. These are very interesting and enlightening sessions with good opportunities to both learn and present.
- If you organise it, there are opportunities to spend time at the Ediyn Lobo Centre (Luton's Community Paediatric Centre) where you can observe patients managed in the community as well as gain additional Child Protection experience. Again, if you organise it, you may wish to spend time at Keech Hospice to gain experience of Palliative care and associated end of life issues.

Day	Time	Session
Monday	12:30-13:30	Paediatric and Neonatal X-ray Meeting
Tuesday	12:30-13:30	Hospital Grand Round; case studies and teaching from a different department each week
Wednesday	15:30-17:00	Paediatric Teaching Session 1 st Wednesday; Journal Club 2 nd Wednesday; SHO case presentations 3 rd Wednesday; Morbidity and Mortality Meeting 4 th Wednesday; External speaker (audit presentations every 3 months)
Thursday	11:30-12:30	1 st Thursday; Dermatology for medical students (trainees welcome to attend if free)
	12:30-13:30	2 nd Thursday; X-ray teaching for medical students (trainees welcome to attend if free)
	14:00-15:30	2 nd Thursday; Video link paediatric gastroenterology teaching
	15:15-15:30	1 st Thursday; Pharmacy feedback on prescription errors detected on paediatric drug charts over the preceding month
	15:30-17:00	Paediatric Grand Round; each inpatient is presented by the ward SHO/Registrar and discussed in detail amongst the whole team. Updates given about patients who have been transferred to other hospitals. 3 x Medical student case presentations about current in-patients
Friday	15:00-15:30	Paediatric simulation teaching (including joint training with A&E and anaesthetics every 2 months)

- Teaching ward rounds on Tuesdays and Wednesdays (unless ward is extremely busy/under-staffed/there is an emergency). Consultants take time to observe and teach whilst seeing the patients. Junior doctors can be observed seeing patients and then a work-based assessment can be completed.
- In the month leading up to MRCPCH clinical exams, a series of evening sessions are organised. These are given by consultants and registrars and can be attended by anyone (not just Luton trainees) who is due to sit the exam.

Top Tips:

- It is often possible to request sitting in certain clinic sessions- especially to some of the specialist clinics may be of particular interest e.g. GOSH/Luton Endocrine clinic, genetics clinic, GOSH/Luton gastroenterology clinic.
- Try to keep the handover list updated throughout the course of the day
- When you admit a PAU patient to the ward, tell the ward team as soon as possible in order to promote patient safety and so that nobody is missed when it comes to handover.

- Take any available opportunity you can to do WBAs consultants are often very obliging but it's up to the trainees to be assertive!
- Listen to the nurses! They are all very knowledgeable and experienced and tend to know our regular patients extremely well.
- PAU often gets very busy and the "results book" (where investigations to be chased for discharged patients are written) often gets overlooked. Ensure that this is reviewed regularly (either by yourself or by your SHO) having to tell someone about a positive urine culture that is now 3 weeks old and hasn't been treated is never a good thing! Adding phone numbers and current antibiotics to the details in the book is also very helpful.
- The staff car park gets very busy so aim to arrive before 8:10 for an 8:30 start
- Sometimes Paediatric A&E gets very busy and it is worth going downstairs to A&E to see patients quickly rather than waiting for them to be transferred upstairs as sometimes they could be discharged before reaching the unit which saves a lot of time and paperwork!
- Tuesday afternoon's paediatric registrar clinic is usually very busy with only 15 minutes to see each patient. If is often worth taking time to call patients the day before or on the morning of the clinic to see if a review in clinic is still required. Sometimes a telephone review will suffice.
- Laurell (one of the ANPs in PAU) produced some fantastic cards with some useful protocols/dosages etc. which can be attached to your lanyard – ask her if you can have a set.
- If you need to do a referral letter or child protection report for example, it is often much quicker (and easier to keep a record of) to dictate it on BigHand and ask one of the Paediatric Secretaries to type it up. They are usually very helpful and obliging.
- The ward assistant Lorna works on the ward every weekday morning until about 14:30. Not only is she very friendly but she can tell you where most things are kept, will take echo and EEG requests etc. to their respective departments for you and will even make you a milkshake on her milkshake round if you'd like one!