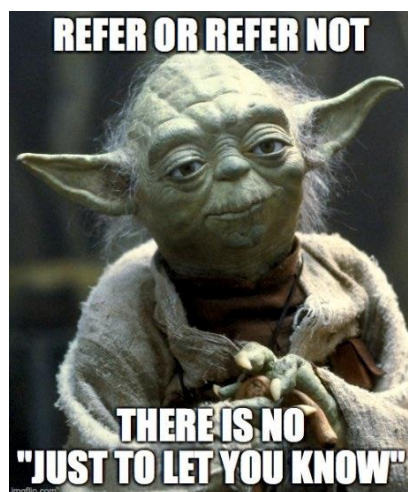


The Grade 1 View



From the trainee reps...

Welcome back! It's spring, and that is always such a lovely time of year. This spring, we have the fantastic news that one of our very own consultants has been made a member of council for the RCOA. A huge congratulations! But spring also brings upheavals, whether it's the airing out of spring cleaning, or the surprise dismantling of NHS England. We've included a political roundup for those of you feeling a little bemused about exactly what is happening to the health service and training. We also are delighted to announce an amazing opportunity to work in Gibraltar as part of an OOPP! Read all about it below.

We're so delighted to have regional Wider Anaesthetic Workforce representatives joining our team to bring your voices to the School wider region. Welcome Godfrey Nerupfunde and Neetha Raj!

As always, our doors and inboxes are always open - now with a new and improved email address! For now you can reach us at both eoanaestheticfeedback@gmail.com and our new mailbox: cuh.eoanaesthesiareps@nhs.net



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RCOA Council Appointment

Congratulations to Dr Emily Simpson on her appointment to the RCOA Council! Dr Simpson (MBChB, FRCA, FICM, PGCert in Medical Education, in case you were wondering!) is our very own deputy Head of School and Regional Advisor for Anaesthesia. She is a consultant at Broomfield Hospital and has held other auspicious roles such as Chief Examiner for the Primary FRCA. During her tenure in this role, she created the reasonable adjustment policy for candidates and worked hard to expand exam capacity. In her new role as part of the RCOA council, she will provide leadership to our specialty as well as setting standards for clinical practice, education and examination. We could not be more proud of Dr Simpson for this fantastic achievement, the latest in a long line of noteworthy accomplishments. In her own words:

'A huge thank you to everyone for your support! It's an honour to represent the East of England and I'm committed to being a strong and direct voice for our region. The East of England has led the way with many innovative ideas that have shaped national practice and with your support, we'll keep driving progress forward.'

I want to be accessible and make sure anaesthetic doctors have a clear voice at Council. Whether you have concerns to address or ideas to share, I'm here to listen and represent our region's views. My door is always open and I welcome conversations on the issues that matter to you.'



Emily'

Political Roundup

On 13th March, Emma, Vish and Kate (60% of your intrepid trainee rep team) joined TPDs Dr Underhill and Dr Pathmanathan in London for a listening event on the shape of postgraduate medical training. This event, run by the postgraduate medical education reform team at NHS England, was designed to hear the voices of residents, consultants and educators on how postgraduate medical education should be shaped for the next 10-15 years. Admittedly, the day was slightly derailed by the announcement, some two hours prior to its commencement, that NHS England was being dismantled... But Chris Whitty, Sheona MacLeod and their teams forged ahead with a fantastic afternoon asking for our opinions on how best to improve training in the future.

These consultation events, run throughout the country for different regions, will inform a proposed plan for the future of training. The aim is to present this plan to the government in early July.

Regarding the government's intent to abolish NHS England, it remains to be seen what the effect will be at a regional level. NHS England and Health Education England formally merged in 2023, and therefore much of our School administration comes under the auspices of NHSE. The administrative teams at NHSE are instrumental in supporting recruitment, ARCPs and all of the work done by the clinicians in leading educational roles at a local and regional level. It is not yet clear how (or indeed whether) that administrative support will be amalgamated into the Department of Health and Social Care. What is clear is that it is a time of uncertainty for many as we navigate the future of postgraduate training, the governing bodies of the NHS, and the political climate of the next few years.

It was a lovely lunch though!



Save the Date!

The Anaesthetic Trainee Forum and Wellbeing Day

is returning to the East of England

4th July 2025



alongside...

The Great East of England Anaesthetic Trainee Bake Off Series 2

On your marks

Get set

BOOK your study leave and sign up on Bridge!

EASTRN update

First, a huge thanks to every single one of our collaborators across the EoE who have worked so hard over the last couple of months to help us complete not one but two projects!

FLO-DM: FLuid prescribing in perioperative patients with Diabetes Mellitus - this survey-based project was run at the end of November and we had an amazing 261 responses from across the region! Thanks all for taking the time to fill in a survey on what was, if we are honest, a very dry topic. We are in the process of writing this up and we are hoping to submit it for publication soon.



NEMOE: Neuromuscular monitoring in the East of England'. The majority of departments within the region participated and with your help we were successful in collecting audit data for nearly 300 cases and nearly 300 anaesthetists responded to our survey. We hope the results will provide meaningful insight and highlight areas and ways we can improve this important area of our practice.



Recruitment

All four of our committee members are coming to the end of their tenure in EASTRN. We are therefore looking for some motivated research minded people to carry on the EASTRN mantle. Applications are now open for five committee positions. Please send us a CV with a short paragraph detailing a project (audit/QiP/research) you would like EASTRN to look at undertaking across the region. Please keep your submissions to under 300 words briefly detailing the aims of the project and how you intend to carry it out. To put this in context, NEMOE was pitched this way last year and has now been completed! Two of our committee members have also used EASTRN committee positions to evidence their ST4 applications.

Depending on the degree of competition we may then do a short teams interview or put submissions to a vote.

Send your submissions to eastrn.eoe@gmail.com by 25th April.



EASTRN

East of England Anaesthetic Trainee Research Network



Stage 1 Upcoming
Training Days



Stage 1 eLearning
Modules



Stage 2 Upcoming
Training Days



Stage 2 eLearning
Modules



Stage 3 Upcoming
Training Days



Stage 3 eLearning
Modules



Please join the **WhatsApp groups** for further information on teaching and updates:

Stage 1:

<https://chat.whatsapp.com/LGhCeLWRF1VDdye6Rmsh2D>

Stage

2/3: <https://chat.whatsapp.com/EAv0ljuVprN8ebhmhQ0V32>

Now Advertising: Clinical Fellow in Anaesthesia & ICM St Bernard's Hospital, Gibraltar

The Gibraltar Health Authority, in collaboration with the East of England School of Anaesthesia, offers an Anaesthetic Out of Programme Pause (OOPP) opportunity via a new training link.

Why Gibraltar?

A British Overseas Territory, Gibraltar offers a semi-tropical climate, easy access to Southern Spain & North Africa and direct UK flights (2-hour travel time). The post is based at St. Bernard's Hospital, a busy DGH by the sea, just 5 minutes from town. The hospital boasts stunning views of the bay and North Africa. English is the official language, though Spanish is widely spoken.



The Gibraltar Health Service follows UK NHS guidelines, applies NICE recommendations and is GMC regulated, with visiting teams from Evelina, UCLH, The Marsden and Leicester.

Job Details & Requirements

- Minimum 2 years of anaesthetic training, including ICU & obstetric anaesthesia experience.
- IACOA (Initial Assessment of Competence in Obstetric Anaesthesia) required to cover obstetric on calls
- Completion of CT2 Anaesthetics or CT3 ACCS-Anaesthesia (or equivalent), LEDs, Clinical Fellows, Higher Residents
- EWTD-compliant rota (<48 hrs/week, CPD time included).
- 6 weeks annual leave per annum.
- Clinical Experience & Training
- Join a department of 7 residents & 9 consultants, delivering Anaesthetic & ICU services for locals, tourists & cross-border workers.
- Residents gain exposure to a wide range of surgical specialties, including:
 - Orthopaedics (regional blocks, tertiary foot & ankle).
 - Colorectal, bariatric, upper GI, ENT, paediatric (>2yrs), dental, & maxillofacial surgery.
 - Plastics, ophthalmology, obstetrics, gynaecology, & pain management.
- ICU with FICE skills development (mentored by the ICM lead).
- Residents can set personalised learning objectives with UK-trained supervisors using the RCOA LLP. Logbooks, QIPs, reflections and SLEs can be completed, but no HALO sign offs. Residents are encouraged to talk to their TPD first if considering applying.
- Departmental support
- Return UK airfare covered.
- Salary and Job description available on request when expressing an interest.
- Rental allowance available.
- £1900 study allowance & 2 weeks study leave per annum.

Application Details

Request application packs via recruitment@gha.gi.

Submit applications to england.expansiondistribution.eoe@nhs.net no later than 17:00 on Friday 25 April 2025

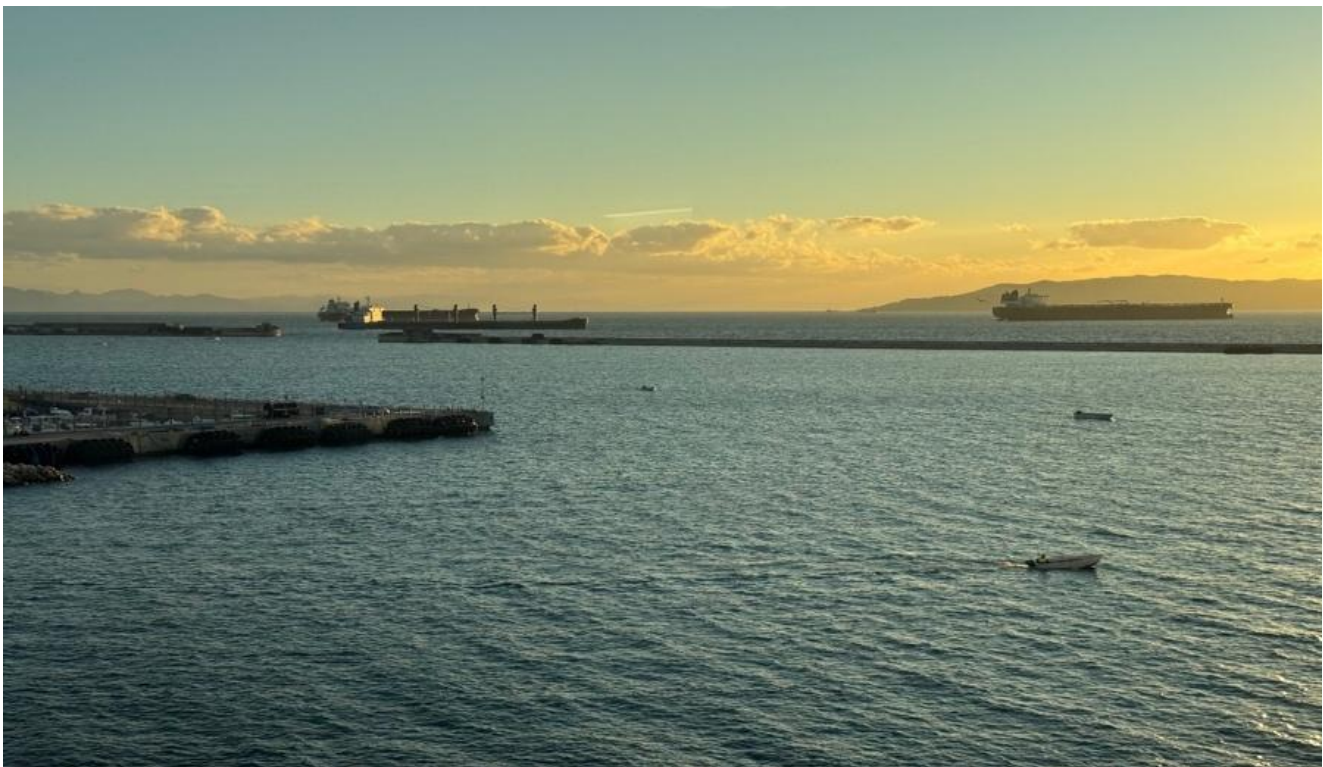
Interviews on Tuesday 13 May 2025

For enquiries, contact:

- Dr Jan Novak, Clinical Director (jan.novak@gha.gi)
- Dr Eschtike Schulenburg, TPD & Gibraltar Lead (eschtike.schulenburg1@nhs.net)

Note: St Bernard's Hospital is not GMC- registered for training time to be recognised. However, evidence collected in LLP may be considered by TPDs at ARCP to feed into HALO sign offs on an OOPP.

Join us for a unique & rewarding Anaesthesia & ICM experience in Gibraltar!



The view from recovery!

Spotlight On: Luton and Dunstable

Kate McGibbon, Anaesthetic Core Trainee

Luton and Dunstable hospital is situated in Bedfordshire as part of the Bedfordshire NHS Foundation Trust, along with Bedford hospital, a 25-minute train from central London and next to the beautiful Dunstable Downs. See photo if you've never heard of them...

When cycling from the station to the hospital I can just about glimpse the hills in the distance - at least now that it's light in the morning! There are even lockable bike sheds, showers and lockers! For non-cyclists, the hospital is a stone's throw from the M1.

Now, enough real estate agent description - more on the anaesthetic department.



The anaesthetic department comprises emergency theatres, obstetric theatres, elective theatres and offices in different areas. We have a shiny, new theatre block nearing completion. Two fantastic college tutors have recently taken up the mantle: Suganya Sabaretnam (who is also an RCOA examiner) and Adam Spong, both of whom go above and beyond in theatres and their free time to help ensure you can achieve your study leave, EDT and rota/module related learning needs.

To that end, the college tutors and a rolling series of resident doctors are championing the revival of Wednesday afternoon teaching and journal clubs. These have become a rare and valued opportunity to connect with anaesthetic peers, trainee reps and the tutors for learning, pastoral support and community building. EDT is pre-set in the rota, and we have attentive Clinical Governance, Research leads and librarians in the education centre who can help use this time effectively. For example, many resident doctors have been involved in EASTRN projects locally using EDT time.

Luton is a specialist airway centre and bariatric centre which means you may find yourself undertaking more fiberoptic intubations than central lines (as was the case for me in the past year). Modules involve multidisciplinary pre-assessment and intra-operative management of bariatric patients who travel from far and wide to engage in treatment. The maternity unit is one of the busiest in the country providing plenty of exposure in and out of hours and opportunities to be involved in improvement projects. A slew of new consultants who trained in EOE recently joined the department and we have a healthy number of locally employed doctors. Several members of the team take an interest in regional anaesthesia and recently organised a hands-on study day.

Out of hours, the local demographics also present interesting trauma and paediatric cases. Fortunately, there is always an SpR or equivalent in ICU, emergency theatres and obstetrics with 2-3 SHOs across emergency theatres and ICU, together with a robust supply of rest spaces. Make sure you bring some food for your on-calls unless you like microwaveable pasties... daytime curry opportunities, however, are plentiful and delicious!