

Health Education East of England

School of Anaesthesia Visit to Ipswich Hospital NHS Trust Executive Summary Date of visit: Monday 21st September 2015	
HEEoE representatives:	Dr Helen Hobbiger – Head of School of Anaesthesia and Associate Dean Dr Christopher Sharpe – Training Programme Director Dr Nicola Barber – Regional Adviser for Anglia School of Anaesthesia Dr Rhiannon Jones – Trainee Representative Ms Liz Harlaar – Lay Representative
Trust representatives :	Mr Nick Hulme – Chief Executive Dr Barbara Buckley – Medical Director Mr Robert Brierly – Associate Director of Medical Education Dr Martin Mansfield – Outgoing Clinical Director, Anaesthesia Dr Hema Ganapathy – Consultant Anaesthetist/College Tutor Dr Justin Brown – Consultant Anaesthetist/Educational Supervisor Dr Richard Lloyd – Clinical Lead Intensive Care Medicine Dr Richard Howard- Griffin – Consultant Intensive Care Medicine Dr Sentil Nadarajan – Consultant Anaesthetist/Educational Supervisor Dr Hugo Boyes – Consultant Anaesthetist/Rota Co-ordinator
Number of trainees & grades who were met:	ST6 x1 CT2 (ACCS) x1 CT2 x1 CT1 x3 Clinical Fellow x1

Purpose of visit :
<p>This was a follow-up visit to determine progress made in areas of significant concern as previously identified at the School of Anaesthesia Visit on the 14th July 2014. Issues requiring discussion but which were not mutually exclusive included:</p> <ul style="list-style-type: none"> • Educational support and supervision, with the need for all educational supervisors to have a working knowledge of the curriculum and School paperwork. • The structure and frequency of the local teaching programme. • Exposure to training in obstetric anaesthesia. • The availability of Consultant assistance for those trainees working under indirect supervision. • Teaching of transfer training competencies. • The departmental facilities for trainees. <p>Information available to inform the visit included the result of the 2015 GMC National Training Survey, in which Ipswich received no red flag outliers, the regional annual trainee survey and the response from the Trust to the previous action plan dated the 8th September 2014.</p>

Strengths:
<p>The visitors were impressed by the number of representatives from the Trust which included members of Senior Management and appropriate representation from the departments' of anaesthesia and Critical Care. This demonstrated a very real commitment to training and post-graduation education.</p> <ul style="list-style-type: none"> • It was noted that results for Anaesthesia in the GMC NTS had been improving

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- No instances of bullying or harassment were identified
- No concerns regarding patient safety were identified
- All trainees felt valued and well supported by the department. All would recommend their post in Ipswich to others.
- There were no problems gaining study leave.
- All trainees were aware of the dates of the regional teaching days and were released to attend.
- There is an in-hospital simulation centre which is well utilised by the department. The role of simulation is further supported by the development of a Clinical Fellow post which is usually occupied by an Anaesthetic Trainee.
- Novice trainees had been sent an introductory booklet prior to starting in the department which was well structured and quote 'very helpful'.
- On arrival all trainees had been given a named educational supervisor. All had met with the ES within the first two weeks to map out individual training objectives. Further regular meetings with ES's had been planned. All trainees had received the appropriate School paperwork.
- No trainee had problems in getting competencies signed off using the e-portfolio.
- A regular well structured in-house teaching programme and journal club had been embedded. Trainees were "mostly" given protected time to attend. The majority of topics covered addressed their learning needs.
- Received feedback on the local novice induction programme had so far been positive.
- The department has made three substantive Consultant appointments in the last year
- When working with indirect supervision trainees reported there was a named supervising Consultant who was nearby and readily accessible.
- There is in development an in-house Anaesthetic Training website which is hosted on the Trust's intranet site this has the potential to be very good.
- All trainees had already or were soon to attend the transfer training course. No trainee had been requested to undertake intra or inter hospital transfers prior to achieving the appropriate required competencies.
- Training in Critical Care Medicine was particularly appreciated.
- Dr Hema Ganapathy is to be congratulated in her diligence at addressing the previously raised concerns. Trainees who had been based in Ipswich for some time remarked on a significant improvement in the training environment.

Areas for development:

1. The Trust IT induction programme did not equip trainees in a timely manner with the required login details to access necessary information. Trainees were required to make further individual arrangements with some departments to complete the process. This was problematic for those required to work immediately out of hours. No issues were highlighted regarding the departmental induction process.
2. Senior trainees could be more involved with the delivery of the local teaching programme and mentoring the novice trainees.
3. There were some reported instances of trainees being moved from training lists at the last minute in order to provide service. The trainees did not view this as a significant concern however it should be noted that the majority of trainees present were Core and therefore less likely to be affected.

Significant concerns:

1. The availability of opportunities to build on achieved core competencies in obstetric anaesthesia continues to be a significant problem. In mitigation it is recognised that the geography of the hospital, unlike some other DGH's, does not enable cross-cover to maximise on experience. There are national problems in the ability to recruit into permanent SAS posts in order to support out of hours rotas.
2. Departmental accommodation continues to be poor with trainees having to share office space with Consultants.

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The Trust does however have Wi-Fi services installed and the trainees now felt there was adequate computer access.

Requirements:

1. Monitoring of in-house teaching courses should be undertaken to ensure that learning needs continue to be addressed and that trainees are able to attend. The majority of sessions should continue to be Consultant led although it is acceptable for some to be delivered by the ST trainees.
2. The ownership of lists needs to be monitored. Training lists should be protected and only on very rare occasions should trainees be reallocated at the last minute.

Recommendations:

1. The department should review working patterns with a view to increasing core trainee exposure in obstetric anaesthesia. Whilst all trainees achieve the minimum required competencies the inability to then build on this experience disadvantages them when moving up to the ST grade.
2. A review of the departmental facilities should again occur. It is important for trainees to have a place to meet regularly and undertake personal study. This is especially true in Ipswich, where given the geography of the hospital, meeting with peers has a tendency to become erratic.
3. Education Supervisors should continue to meet as a group, say three times per year with the College Tutor to ensure their 'training knowledge base' remains contemporaneous.

Timeframes:	Action Plan to Deanery by:	6 th January 2016
	Revisit:	3 years

Head of School: Dr Helen Hobbiger

Date: 21st September 2015

Deputy Postgraduate Dean: