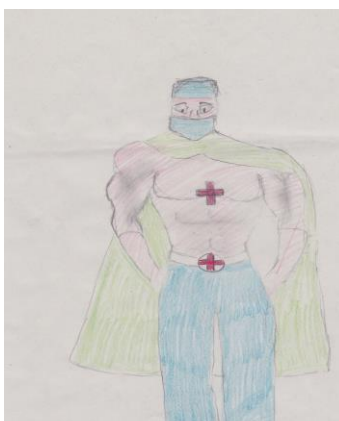


10th Yorkshire and Humber School of Paediatrics Annual Meeting

Unsung heroes of Paediatrics

Double Tree by Hilton Harrogate
Majestic Hotel and Spa
Wednesday 13th November 2019



Additional Information



We are proud to be baby friendly!
The baby friendly room is on the ground floor in *Regency Room*. Water will be provided in the baby friendly room. Babies and toddlers are welcome in the main presentation area when there are no presentations.



There is free parking available at the venue.
It is also a short distance from the train and bus stations at Harrogate.

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Dear Colleagues,

On behalf of the organising committee, we are thrilled to welcome you all to the 10th Yorkshire and the Humber School of Paediatrics Annual Meeting, in the Majestic Hotel, Harrogate.

We are so thrilled to be celebrating the 10th year of this fantastic meeting. The annual meeting is always organised by trainees for trainees. It provides a great opportunity for paediatric trainees and allied health professionals from across Yorkshire and the Humber to come together and learn about the most up to date research, share experiences and be inspired to improve the health of children in our region and beyond.

The theme of this year's meeting is **Unsung Heroes of Paediatrics**, where we will be hearing from people who truly represent the best of our specialty as well as hearing about what the future might hold.

This packed meeting will provide you with great learning opportunities, with renowned guest speakers, informative workshops and inspirational talks.

A key part of the theme is also the opportunity to celebrate the best of our specialty through the Paediatric Award for Training Achievements (PAFTA). Trainees, allied health professional and supervisors have been nominated by their peers, because they have gone the extra mile to look after their patients, as well as their colleagues.

We are honoured to be able to announce the Yorkshire and the Humber PAFTA nominees and winners at the meeting.

Working flexibly and training less than full time is becoming more and more popular. We are pleased to support this with the provision of a baby friendly room so that those who may not have been able to attend due to childcare responsibilities are still able to join us.

As always, this meeting has been funded and supported by Health Education England and the School of Paediatrics and we are very grateful for their support. However, most of the organisation and planning has been done by a team of volunteer trainees. Without the help and dedication from our committee members this event would not have been possible, and we'd like to take some time here to say thank you.

We would also like to express our utmost gratitude to all our speakers at the meeting, for taking time out of their busy schedules to educate and inspire, without whom we wouldn't have a meeting! We would also like to thank all of the paediatric consultants that marked your excellent abstracts for presentation and those that will be marking posters and presentations at the meeting.

Finally, we would like to thank you for your participation and sincerely hope you enjoy the meeting.

Dr Andy Brookes and Dr Rebecca Schoner

Co-Chairs of the SoPAM 2019 Organising Committee

Aims of the Yorkshire and the Humber School of Paediatrics Annual Meeting 2019

- ◆ Create a forum for trainees to develop their academic skills and improve clinical knowledge
- ◆ To share interesting clinical information and management related issues across the region, thereby creating a forum for debate in the form of lectures and workshops
- ◆ Provide education, training and feedback on the academic abstract submission process for postgraduate trainee paediatricians
- ◆ Provide a safe and friendly environment for trainees and consultants alike to become more involved in academic paediatrics, at every level
- ◆ Allow an opportunity for trainees to develop their oral and poster presentations skills
- ◆ Offer a showcase of postgraduate research and management of complex clinical cases
- ◆ Provide a regional platform on an annual basis for the paediatric specialties to disseminate knowledge and enhance education across various paediatric disciplines
- ◆ Recognise and appraise the success of research and good clinical care achieved
- ◆ Engage and value the contributions of the entire paediatric academic community

Programme

08:30			Registration and coffee		
09:00-09:15	Welcome and Introduction	Dr. Karin Schwarz , <i>Head of School of Paediatrics for Health Education England Yorkshire and the Humber, HEEYH</i> Dr Andrew Brookes & Dr Rebecca Schoner <i>Committee chairs</i>			
09:15-09:45	RCPCH Paediatrics 2040: Future Models of Care	Dr Victoria Hemming , <i>Paediatric Consultant, Scarborough General Hospital</i>			
09:45-10:30	Creating an Acute Ambulatory Care Service in Bradford	Dr Mat Mathai <i>Paediatric Consultant, Bradford General Infirmary</i>			
10:30-11:00	Coffee break (poster viewing)				
11:00-12:00	<p>The extraordinary journey of the 380g neonate: the storm of controversy.</p> <p>Establishing a video MDT meeting between Cameroon and Leeds childhood cancer services</p> <p>Unusual presentation of an uncommon disease: Juvenile Onset Lupus</p> <p>Adolescents in Leeds Children's Hospital: Who is admitted and why?</p>	Dr Kate Parmenter <i>ST1 Paediatric trainee</i> Dr Jess Morgan <i>ST7 Clinical lecturer in Paediatric Oncology</i> Dr Joshua Holder <i>FY3 doctor</i> Georgina Wicks <i>University of Leeds Medical Student</i>			
12:00-13:00	Lunch (poster viewing)				
Workshop Sessions					
13:00-13:40	Educational Supervision in Paediatrics	Dr. Karin Schwarz , <i>Head of School of Paediatrics for Health Education England Yorkshire and the Humber</i>			
	A workforce in crisis: safeguarding our profession	Dr Melody Redman , <i>Leadership fellow in Child Health Workforce Planning</i>			
	Presentation skills - more than just copying others	Mr Ross Fisher , <i>Consultant paediatric surgeon, Sheffield Children's Hospital</i>			
	Ethical dilemmas in paediatrics	Dr Adam Nicholls <i>PICU Consultant, LGI</i>			

13:45-14:25	Sudden Unexplained Death in Children (SUDIC)	Dr Eduardo Moya Paediatric Consultant, Bradford Royal Infirmary Louise Clarkson Lead Nurse for SUDIC in Bradford
	Surviving and Thriving in Paediatrics	Dr Sanjay Suri Paediatric Consultant, Rotherham General Hospital Dr Victoria Stead
	OOPE - A window of opportunity	Dr Khurram Mustafa, Dr Aoife Hurley & Dr Caroline Fraser
	Plugging into the GRID - how do you Spark(le)!	Dr Rum Thomas, Dr Monica Negoita & Dr Yousef Gargani
14:25-14:45	Coffee break (poster viewing)	
14:45-15:30	Behind the scenes at Embrace	Dr Cath Harrison Neonatal consultant and Neonatal Lead, Embrace Transport Service Jo Whiston Lead Nurse, Embrace Transport Service
15:30-16:30	Balloon Debate: The Best of the Best - which subspecialty should you choose?	Dr Yousef Gargani , Neonatal Grid Trainee Dr Mark Winton , PICU Grid Trainee Dr Yasmine Kamal , Consultant Community Paediatrician Dr James Houston , General Paediatric Level 3 Trainee
16:30-17:00	Summary, Remarks, Awards (including PAFTAs & Mary Rudolph Award)	Dr Karin Schwarz , Head of School of Paediatrics for Health Education England Yorkshire and the Humber Dr Tim Lee , Paediatric Respiratory Consultant & Head of Studies for Postgraduate Programmes in Child Health, University of Leeds
Close		

Workshop Sessions

	Room 1	Room 2	Room 3	Room 4
1st time slot 13:00-13:45	Hannah Ethical Dilemmas in Paediatrics by Dr Adam Nicholls	Rushna "Presentations skills- more than just copying others." by Mr. Ross Fisher	Olivia Educational Supervision in Paediatrics by Dr. Karin Schwarz .	Sadaf "A workforce in crisis: safeguarding our profession" by Melody Redman and Victoria Dachtler
2nd time slot 13:45-14:30	"OOPE -A window of opportunity" by Dr Khurram Mustafa, Dr Aoife Hurley and Dr Caroline Fraser.	"The Child Death Review Process: from the Rapid Response to the Child Death Overview Panel" by Dr Eduardo Moya and Louise Clarkson	"Plugging into the GRID- how do you Spark(le)!" by Dr Rum Thomas, Dr Monica Negoita, Dr Yousaf Gargani	"Wellbeing: From surviving to thriving" by Dr Sanjay Suri and Victoria Stead

Speakers

Dr Karin Schwarz

Originally born and raised in Germany, I have been working in the UK since I graduated from medical school in 1991. Love and the opportunity to do Paediatrics kept me in Yorkshire and I have in the past worked in many of the hospitals in the East and West (but sadly not the South) of the area.

Since 2001 I have been working as a Consultant Paediatrician at Huddersfield and Halifax and locally I am the lead clinician for neonates.

I have always had close involvement with trainees and training as rota organiser, college tutor and supervisor. During my time as TPD between 2009 and 2015 I have developed the ARCP process and have established exams related courses in the region. I have been lucky enough to be appointed Head of School of Paediatrics in June 2015 and I greatly enjoy this role. It is a pleasure to work with all the trainees, TPDs, HEE team and trainers in Yorkshire and nationally. During the last year I have also taken on some additional responsibilities as acting deputy dean to help cover a vacancy.

Outside work I spend time with my husband and 4 children, act as the children's taxi driver, stand at the side of football pitches and drag everybody out of the house for long walks, which the dog and I enjoy the most. I also try to keep fit by running (not very far) and playing tennis (unfortunately not very well).

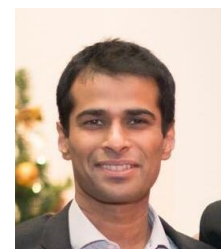


Dr Mathew Mathai

Dr Mathai has been a Consultant Paediatrician at the Bradford Teaching Hospitals NHS Foundation Trust since 2008. He completed his undergraduate training in Queens University in Belfast and then his initial paediatric training in South Wales. He has worked at the 'coal face' of acute general paediatrics in Yorkshire since 2001. Over the last 10 years he has worked closely with colleagues across the health system in Bradford. In 2018 this work resulted in the development of the Ambulatory Care Experience (ACE) Service that is helping to transform the acute care pathway for children in Bradford. It was awarded the HSJ prize for Urgent and Emergency Care in 2018.

Dr Mathai is a passionate advocate for system wide transformation through collaboration and research. In September 2019 and with Dr Reena Basu, HEE leadership fellow, he hosted the first Paediatric Ambulatory Care Network Meeting for West Yorkshire and Harrogate. The meeting had representation from a wide range of stakeholders including families; health providers and commissioners; the Yorkshire School of Paediatrics; academics and researchers; innovators in new care models, telehealth, machine learning and service modelling; the third sector; NHS England, the RCPCH and Health Education England. The meeting aimed to agree a shared vision for ambulatory care as well as a strategy to meet the recommendations of the NHS Long Term Plan.

Dr Mathai hopes that trainees will join the newly formed network and be the heroes transforming health care for CYP regionally and nationally in the coming years.



Dr Cath Harrison

Cath is a neonatologist with an interest in Global Health with training in the UK, South Africa and Australia.

She has been a consultant neonatologist at Leeds Teaching Hospitals NHS Trust since 2004 and has also been the neonatal lead for Embrace, Yorkshire and Humber Infant and Children's transport service.

Her other areas of interest are newborn resuscitation, ventilation and education and she is passionate about training opportunities in neonatology.

Cath has been on the Royal College of Paediatrics Speciality Advisory Committee chair for neonatology for the last 7 years and is now their training advisor.

She has just been appointed as the chair of the UK Neonatal Transport Group.

Cath also volunteers for a UK charity providing newborn education training in Africa and she works regularly in Rwanda and the Democratic Republic of the Congo.

Dr Victoria Hemming

Dr Victoria Hemming is a consultant paediatrician at York Teaching Hospital NHS Foundation Trust working cross site at Scarborough and York Hospitals. She was appointed as cross site Clinical Director for Child Health in August 2019.

She graduated from University of Newcastle-upon-Tyne and moved to Yorkshire to start her Paediatric Training in 2007. During her training she was able to take the opportunities to work for year in Ethiopia as a VSO/RCPCH Fellow and spent a year as a Leadership Fellow in Quality Improvement at York Hospital.

Victoria leads the development of the Children Assessment Unit and is the Paediatric Diabetes Lead in Scarborough. She has an interest in the challenges faced by remote and rural hospitals and is part of the consultative group on models of care for the RCPCH Paediatric 2040 project.



Oral Presentations

Presentation 1

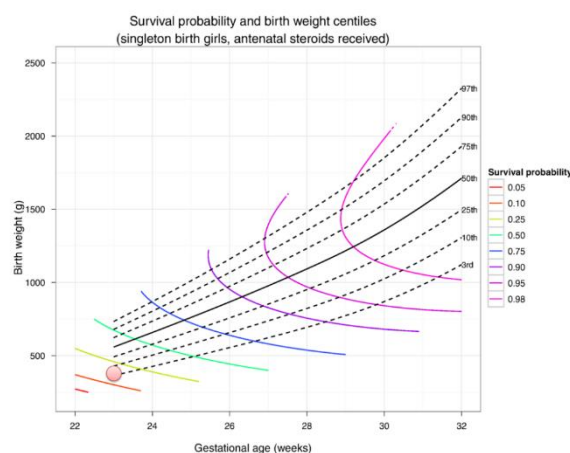
Title: The extraordinary journey of a 380g infant, the storm of controversy?

Background: The extremely premature and low birth weight infant remains at high risk of death and disability¹, a situation confounded by paucity of data in the literature for babies weighing < 500g. Reported survival rates vary greatly, possibly due to differences in attitudes towards resuscitation².

Case: We describe the extraordinary case of an infant, born at 23+2 weeks gestation, weighing 380g via spontaneous vaginal delivery into the antenatal ward toilet. A good heart rate initiated resuscitation and she remained ventilated for 46 days, spending a further 52 days on non-invasive respiratory support. She has chronic lung disease requiring minimal supplemental home oxygen. She had a grade 2 intraventricular haemorrhage which resolved at 36 weeks gestation. Full enteral nutrition was accomplished by day 17. Grade I retinopathy of prematurity was identified but required no medical intervention. Despite an estimated mean survival probability of 18.9%³, at 180 days (39 weeks corrected gestation), the infant was discharged home weighing 2270g.

We discuss the potential contributing factors and challenges that led to her successful discharge and the ethical components of her care. Antenatal factors included her delivery in a tertiary neonatal unit harbouring technological and clinical advances, exposure to antenatal steroids and magnesium sulphate. Postnatal factors included suitable equipment to administer respiratory support, slow transition from breast milk to formula, emphasis on growth by using supplements to achieve desired growth rate and family integrated care. Intrinsic factors played a vital role in her outcome, namely the lack of positive culture sepsis and lack of development of NEC, PDA, major IVH or ROP.

Conclusion: Survival of infants with birth weight of less than 500g is possible but rarely reported. Long term follow-up is necessary to assess neurodevelopmental, pulmonary outcomes and quality of life.



References:

1. Glass HC et al. Outcomes for extremely premature infants. *Anesth Analg.* 2015 Jun; 120(6): 1337–1351
2. Gillone J et al. Outcomes of infants with a birthweight less than or equal to 500g in Northern England: 15 years experience. *Acta Paediatr.* 2018 Feb;107(2):223-226. doi: 10.1111/apa.14024. Epub 2017 Sep 17
3. Imperial College London. Neonatal survival model. Neonatal Data Analysis Unit. Available from: <http://www2.chelwest.nhs.uk/NDAUtools/#>. Accessed: 13 August 2018

Presentation 2

Title: Establishing a video-Multi Disciplinary Team meeting between Cameroon, West Africa, and Leeds childhood cancer services

Background: Each year, around 150 children with a new diagnosis of cancer will be treated within one of four Cameroon Baptist Centre (CBC) hospitals. The service is run by one paediatric oncologist, alongside experienced nurse practitioners and nursing staff. The CBC childhood cancer service has been twinned with the paediatric haematology/oncology department in Leeds since 2016. This service development project aimed to establish a multidisciplinary team meeting (MDT) to support the diagnosis and treatment of childhood cancer in Cameroon

Methods: A monthly video-conference MDT, using web-based technology, involving all 4 Cameroonian sites and the Leeds twinning partners was established in March 2019. A Standard Operating Procedure and MDT proforma were developed and then continuously improved with feedback. Data were collected on the use of the MDT and its impact on patient management and staff experience.

Results: There have been five MDTs so far, with 73 discussions of 50 cases aged up to 25 years. Most patients are discussed at only one MDT, but more complex cases have been discussed up to four times. The commonest diseases discussed are Burkitt's lymphoma, Wilm's tumour, retinoblastoma and acute lymphoblastic leukaemia. In 88% of cases where staging information was available, the patients had stage 3 or 4 disease. In 58% of cases, the MDT recommendation was to continue planned treatment, in the remaining 42% further investigations, alternative treatment, referral elsewhere or palliative care were recommended. Within qualitative data, team members reported multiple benefits of the MDT, including education, sharing the burden of decision making, building team relationships, and supporting more cost-effective decision-making within this low resource setting.

Conclusion: This project has shown the feasibility of establishing video-MDTs between high income and low/middle income countries. We have demonstrated impact on patient management and staff experiences. We are continuing to use audit and quality improvement approaches to develop the project.

(Note: additional data will be available prior to the conference and thus precise numbers may change)

Presentation 3:

Title: Unusual presentation of an uncommon disease: Juvenile-onset Lupus

Juvenile-onset Systemic Lupus Erythematosus (jSLE) is a rare autoimmune disease of multiple systems and manifestations associated with higher mortality and morbidity than its adult counterpart. With an incidence of 0.3-0.9 per 100,000, it accounts for 15-20% of all SLE¹. We report a case report of a 15 year old Asian girl who presented in a District Hospital with unusual symptoms and was eventually diagnosed with SLE.

She presented on three occasions to the hospital's A&E with ongoing history of body aches, particularly knee pain, fever and lethargy over two weeks. On two occasions she was discharged from A&E but was referred to the Paediatric team on her third presentation. Examination revealed maculopapular rash on hands and around mouth. She had mildly raised inflammatory markers and microcytic anaemia on blood tests. She was misdiagnosed as hand, foot and mouth disease and discharged with a Paediatric clinic follow-up.

Two weeks later in the clinic she was noted to have developed confusion. She was admitted and commenced on triple antibiotics therapy for suspected encephalitis. Rheumatological work-up was sent along with encephalitis workup. Her initial CT head was normal. On second day of admission, she deteriorated and developed seizures and an oxygen requirement. Chest X-ray revealed a possible right sided consolidation with effusion. MRI head was performed which showed a possible basal ganglia stroke. She developed widespread petechiae and a repeat cell count showed a significant drop in platelets and haemoglobin. She was intubated and transferred to PICU where she had chest drains for pleural effusion. Rheumatological bloods returned after three days with ANA positive, Anti-DsDNA >300, Anti-Sm >8.00, rheumatoid factor <8 giving a diagnosis of Systemic lupus erythematosus (SLE).

The case demonstrates how jSLE can present insidiously and progress rapidly with grim outcomes.

Reference:

1. Levy, Deborah M, and Sylvia Kamphuis. "Systemic lupus erythematosus in children and adolescents." *Pediatric clinics of North America* vol. 59,2 (2012): 345-64. doi:10.1016/j.pcl.2012.03.007

Presentation 4

Title: Adolescents in the Leeds Children's Hospital: Who is Admitted and Why?

Background: Adolescents represent a unique group whose requirements differ from those of adults or children(1). The 'You're Welcome' quality criteria emphasises an importance for age-appropriate environments in healthcare settings, while the Teenage Cancer Trust recommend specialist wards for teenagers aged 13-18 years(2, 3). We aimed to identify the number of teenage admissions to Leeds Children's Hospital and their reasons over a one-year period to investigate the potential need for an adolescent ward.

Methodology: A retrospective case note analysis was conducted to identify 13-18 year-olds admitted to Leeds Children's Hospital between 1st September 2017 and 31st August 2018. PPM+ electronic records were used to identify patients' date of birth, date of admission and discharge, reason for admission, admitting ward and specialty. Data analysis was performed using Microsoft Excel. Admissions were categorised based on admission reason, and whether they were elective or emergency. Mean duration of stay, proportion of elective and emergency admissions, and proportion of outliers was calculated for each category.

Results: There were 1,947 adolescent admissions during this time from 1,408 distinct patients. Emergency admissions accounted for 70.1% of admissions, whilst the remainder were elective. Average duration of admission was 3.7 days. A Teenage Cancer Trust Unit is already in place at the hospital; 1,780 admissions took place for reasons other than Haematology/Oncology, of which 469 were for Medical and 530 for Surgical reasons. The most common admission category was Surgery, comprising 27.2% of admissions. The largest proportion of outliers were mental health patients, with 62% of admissions admitted to an outlying ward.

Conclusion: A large number of adolescents were admitted for reasons other than Haematology/Oncology, where patients would not have been in age-appropriate environments. Also considering the number of outliers, this study has highlighted a need for dedicated ward space suitable for adolescent needs.

References

1. Platt, H. The Welfare of Children in Hospital. Br Med J. [Internet]. 1959. [Accessed 13 September 2019];1:166-9. Available from: <https://www.bmj.com/content/1/5115/166>
2. Department of Health. You're Welcome – Quality Criteria for Young People Friendly Health Services. [Internet]. 2011. [Accessed 13 September 2019]. Available from: <https://www.gov.uk/government/publications/quality-criteria-for-young-people-friendly-health-services>
3. Smith, S., Case, L., Waterhouse, K., Pettitt, N., Beddard, L., Oldham, J. et al. A Blueprint of Care for Teenagers and Young Adults with Cancer. [Internet]. 2012. [Accessed 13 September 2019]. Available from: <https://www.teenagecancertrust.org/sites/default/files/Blueprint-of-Care.pdf>

Workshops

1. Ethical Dilemmas in Paediatrics by Dr Adam Nicholls

Dr Adam Nicholls is a consultant paediatric intensivist and the cardiac PICU lead. He trained in London, Birmingham and Manchester. He is a member of the ethics committee at Leeds and has interests in bronchoscopy, ECMO and end of life care. He owns too many cookbooks, has an expanding wine cellar and one day would like to be on MasterChef.

In this workshop, Dr Adam Nicholls, will share some learning points about difficult decision-making when faced with ethical dilemmas in Paediatrics.

2. “OOPE -A window of opportunity” by Dr Khurram Mustafa, Dr Aoife Hurley and Dr Caroline Fraser.

Dr Mustafa is a paediatric intensive care grid trainee at Leeds Children’s Hospital with a special interest in quality improvement and patient safety. After ST4 he took a year out of training to do a clinical leadership fellowship in research and innovation at Leeds Teaching Hospitals Trust.

In this workshop a panel of three Paediatric Trainees will share their out of programme experiences (OOPE) to highlight the opportunities that are out there to enrich Paediatric training ranging from Leadership Programmes to Scholarships and Work experience in Africa.

3. "Presentations skills- more than just copying others” by Mr. Ross Fisher

Mr. Ross Fisher is a Consultant Paediatric Surgeon. He has an international reputation as a presentation skills coach and educator. His website folliet.com details the concept of p cubed presentations, an approach adopted by many colleagues as a more impactful and effective approach to presentation skills.

Skills like lumbar puncture, leading an arrest team or writing a research paper are developed by more than simply unknowingly copying others performing the task. Presentations are fundamental in our education and professional careers and yet few of us have any formal training; we simply copy the (bad habits) we see displayed around us. This workshop will address the foundations of presentations as a skill and introduce techniques to develop beyond simply copying.

4. 'The Child Death Review Process: from the Rapid Response to the Child Death Overview Panel’ by Dr Eduardo Moya and Louise Clarkson

Dr Eduardo F Moya is a Consultant Paediatrician at Bradford Teaching Hospitals. He is one of two Paediatricians currently sharing the Role of Designated Doctor for Child Deaths covering both Bradford and Airedale. Louise Clarkson is the Child Death Review (CDR) Manager for Bradford and Airedale. The Bradford and Airedale CDR Team has investigated and reviewed a large number of Childhood Deaths since 2008. Bradford and Airedale have the highest Infant and Child Mortality rates in Yorkshire and these are well above mortality figures for England and Wales.

Death Categories 8 (Neonatal) and 7 (Chromosomal/Genetic) have been all along the commonest causes of death. The percentage of unexpected deaths has remained fairly constant around 22%.

In this workshop Dr Eduardo Moya, Paediatric Consultant at Bradford Royal Infirmary and Louise Clarkson, Child Death Review (CDR) Manager will address the challenging management of death in a child; the procedures and investigations required and the support services available.

5. Educational Supervision in Paediatrics by Dr. Karin Schwarz

In this workshop Dr Karin Schwarz, the Head of School of Paediatrics, will go through several hypothetical training scenarios with a group of trainers and senior trainees, giving attendees the opportunity to discuss the management of such scenarios with a peer group. The aim of this workshop is to enhance your ability to deal with such scenarios in real life and also further your understanding of recent changes in paediatric education.

6. "Plugging into the GRID- how do you Spark(le)!" by Dr Rum Thomas, Dr Monica Negoita, Dr Yousef Gargani.

Dr Monica Negoita is a GRID trainee in Community Child Health. She is also passionate about recruitment and retention in Paediatrics, medical education, advocacy in Child Health and ending institutionalization of children. She enjoys Pilates in her free time.

Dr Rum Thomas is a PICU Consultant at Sheffield Children's Hospital with years of experience as the Trainee Programme Director and ARCP Lead for level 2 Paediatric trainees. If you are considering applying for a Paediatric Subspecialties join this workshop where Dr Rum Thomas will take you through the application process. On the panel we have Dr Monica Negoita a Community GRID trainee and Dr Yousef Gargani a Neonatal GRID trainee to answer your questions about GRID application.

7. A workforce in crisis: safeguarding our profession

Dr Melody Redman is an out of programme paediatric trainee currently doing a leadership fellowship. She is currently working as Child Health Workforce Planning Fellow (HEE Future Leaders Programme). She won the 2019 Junior Trainee PAFTA and recently completed an NIHR-funded Academic Clinical Fellowship. She has roles with The Healthcare Leadership Academy, BMA Junior Doctors Committee, and BMA Board of Science.

In this interactive workshop, we will explore the wider global and national workforce crisis, with a focus then on the paediatrics workforce. We will explore some of the opportunities and options to try to tackle these issues.

8. "Wellbeing: From surviving to thriving" by Dr Sanjay Suri and Victoria Stead

Dr Sanjay Suri is a Consultant Paediatrician and Training Programme Director with a special interest in trainee well-being and mindfulness. He is training to be a mindfulness teacher with Bangor University. He has helped to design and facilitate Surviving and Thriving training days for the School of Paediatrics. He believes that all trainees have a right to work in an environment that fosters well-being and a responsibility to look after themselves to deliver safe and compassionate care.

Dr Victoria Stead is a Paediatric Specialty Registrar at Calderdale Royal Hospital. Having left training in 2016, Victoria now combines working as a Registrar, Sexual Offences Examiner, and Teaching Fellow, with co-managing a family of five, a rabbit and a horse. She is passionate about sharing her experiences on surviving and thriving in Paediatrics, with particular emphasis on work-life balance.

They are passionate about wellbeing and resilience of Paediatric training and will deliver this workshop about how to look after yourself while looking after sick children.

Balloon Debate

Biographies

Yousef Gargani - Neonates

Yousef was raised on the right side of the Pennines, on the cobbled streets of Greater Manchester. Whilst scraping through an undergraduate medical degree at his hometown university, he met his future wife, Claire. After completing the Foundation Programme in Bolton together, Claire dragged Yousef kicking and screaming over to Yorkshire. However, as with most things, Claire was absolutely right! Yousef thoroughly enjoyed his level 1 and 2 paediatric training in West Yorkshire, where he worked with some inspirational clinicians, both generalist and specialist alike. However, it was in the world of neonatology where Yousef felt most at home. Yousef was incredibly fortunate to become a neonatal Grid trainee this year, and looks forward to a career in neonatology with an interest in haemodynamics and teaching.

Mark Winton - PICU

Mark is an ST7 PICU grid trainee, currently on an OOPE in adult intensive care and anaesthesia in Bradford. He has an interest in paediatric intensive care, retrieval, peer support, staff well-being and medical education.

After growing up in London he went to medical school in Leeds. Following qualification in 2009 he has taken up paediatric specialist training in West Yorkshire. Mark believes it is 'all about the journey' having taken a number of years out during his medical training to work in more exotic locations such as Uganda, Tanzania, India and now Bradford.

Outside of work Mark enjoys triathlon and doing the laundry for his wife and two young children.

Yasmine Kamal - Community Paediatrics

Yasmine is a Consultant Community Paediatrician in Leeds. Yasmine graduated from Leeds University and after a brief period as a GP trainee returned to Paediatrics to pursue a career in Community Paediatrics. She undertook a MSc in the causes of respiratory symptoms in children with Down's Syndrome, which is her area of interest as well as adoption and fostering. She has a keen interest in teaching and is an ESREP tutor for the medical school. She also teaches on the community paediatric module of the Masters in Child Health.

James Houston - General Paediatrics

James is an ST8 General Paediatrics trainee with a special interest in neonates. I'm currently working in York and plan to get a consultant job in a DGH in the region. I trained and did my foundation years in Birmingham before coming to sunny Yorkshire for my paediatric training. In my spare time I enjoy sport (squash is the current obsession but try to squeeze in some climbing and surfing when I can) and music (which I mainly play at home when no-one else is listening!).

Balloon Debate – How does that work?



Round 1:

Each panel member will have 5 minutes to "sell/rave about" their chosen speciality

Yousef - Neonates

Mark - PICU

Yaz - Community Paeds

James - General Paeds

When everyone has given their 5 minute talk the audience will vote for who they felt sold their speciality the best. Whoever finishes bottom is out or "thrown out of the hot air balloon!"

Round 2:

The remaining 3 panel members will have another 5 minutes each to respond to any banter they had from the other panel members in the previous round and also throw some questions to their fellow panel members.

Following this 15-minute encounter the audience will again vote for who they thought was best and whoever is bottom will be thrown out.

Round 3:

The final 2 panel members will have 5 minutes each of questions from the floor.

There will be a final vote and whoever has the most votes is the winner and sails off in their hot air balloon!

The balloon debate will be menti meter which is a website rather than an app - it is www.menti.com and the code will be displayed during the debate.



Trainee Posters

TITLE OF POSTER	AUTHOR	HOSPITAL
1) "How accurately are we following the Operational Delivery Network guidelines Yorkshire and Humber Region (ODN YH) for Neonatal Cranial Ultrasound Scan (CRUSS)" An Audit of the practice of neonatal Head Scan in York teaching hospital	Rizwan Ali, Muhammad Rizwan, Dineth Wijisiriwardena, Sandeep Sandhu	York
2) Unilateral eye swelling in a six year old – pitfalls in diagnosis	Maddy Hover	Hull
3) Not another viral URTI- a rare case of a cardiac myxoma	Charlotte Burleigh, Victoria Porcelli, Sally Hall, Dr Singh	Pinderfields
4) Outpatient murmur referrals to Paediatricians with Expertise in Cardiology (PECs): Does every child really need to be seen?	Megan Lynn, M Pye, C Davidson	Pinderfields
5) Improving the detection of deteriorating newborns on the postnatal wards	Camilla James, Sindugaa Siva, Hannah Shore	Leeds
6) Evaluation of a paper sepsis screening tool in a busy children's assessment unit	Vidya Sundara, Rebecca Schoner, Dr S Gorman	Bradford
7) Hold Out a Hand	Tricia Barlow, Dr J Kirby	Leeds
8) Long Line Lament	Rebecca Lancaster, Simon Clark	Sheffield
9) Reducing Accidental Extubation on a Tertiary Neonatal Unit	Lucy Summers, Soraya Hachemi, Julieann Peniston, Lawrence Miall	Leeds
10) Passing the Baton: Improving Competence and Confidence in Handing Over	Daniel Roberts, Christopher Lethaby	Leeds
11) Forward Thinking: Seeking Alternatives to Bleeps	Daniel Roberts, Sarah Webb, Amanda Newnham	Leeds
12) Promoting Adolescent Refugees Sexual and Reproductive Health: A case study of Save the Children's work in Aida Refugee Camp, Bethlehem, West Bank, occupied Palestine Territory	May Al-Shaghana	
13) Recognition and management of children with obesity presenting to General Development Clinic	Laura Blakemore, Anuja Natarajan	
14) Baby Friendly Study Group: Pilot and Development of a Formal Education Programme	Laura Blakemore	
15) Standardisation of cannulation and blood taking trolleys in Leeds Children's Hospital	Alix Fonfe, Kristina Lotha, Tom Rance, Fiona Campbell	Leeds
16) Children and young people as collaborators: patient involvement in designing a research project	Melody Redman, Maxine Mutten, Bob Phillips	Leeds

17) Improving trainee attendance to the Paediatric Grand Round	Caroline Fraser, Jenny Orr, Lydia Green, Danielle Ingham	Leeds
18) The Kaiser Permanente Neonatal Early-Onset Sepsis Calculator - A meta-analysis and case review	Katherine Pettinger, Katie Mayers, Claire Breidenbach-Roe, Bob Phillips, Liz McKechnie	Leeds
19) Understanding barriers for research involvement among paediatric trainees	Khurram Mustafa, Carolyn Czoski Murray, Emma Nicklin, Adam Glaser, Jacqueline Andrews	Leeds
20) Correlation between the total number of features of paediatric pseudotumor cerebri syndrome and cerebrospinal fluid pressure	James McTaggart, Deepa Krishnakumar	
21) Referrals Audit	Rhianna Davies, Simon Frazer	Bradford
22) The Diagnostic Value of Ultrasound Scans in Investigating Appendicitis in Children	Maria Herbert, Megan Lewis, Jessica Heffer, Stephen Jones	Pinderfields
23) Refractory Hyperkalaemia...Pass the salt please	Alice Nichols, Hitesh Prajapati, Sandeep Sandhu	
24) How good are paediatric doctors in interpreting ECGs?	Lekshmy Prasad, R Talekar	Leeds
25) Introducing the GR8X (greatix, positive DATIX) at Leeds Children's Hospital	Alix Fonfe, Alex Tattersall, Alex Paes, Amanda Friend, Monica Negoita, Bob Basu, Lawrence Miall	Leeds
26) Audit on documentation of intubation in neonatal unit Scunthorpe General Hospital (SGH) neonatal unit	Mathumoli Ranjan, V Cheruvalli	Scunthorpe
27) Vitamin D deficiency cardiomyopathy	Ban Alkaaby, Imran Bashir	Rotherham
28) An audit measuring predicted impact of the implementation of outpatient phototherapy for uncomplicated neonatal jaundice for patients and medical teams at Bradford Royal Infirmary.	Jessica Morrison, Mathew Mathai	Bradford
29) The accuracy of CRP levels for the Detection of Early Onset Sepsis	Musab Elmantaser, Dr Green, Dr Alia	Hull
30) Formation of the Junior Doctors Forum at Leeds Children's Hospital (LCH)	Rebecca Powell	Leeds
31) Clinical Audit & Service Evaluation on management of presumed and confirmed Malaria disease at Sheffield Children's Hospital NHSFT	Glenda Amenos-Barraza, F Shackley, M Simmerson, M Heywood, E Wynne	Sheffield

Medical Student Posters

TITLE	AUTHORS	MEDICAL SCHOOL
1) Tata Medical Center, Kolkata - an example of a high-quality multidisciplinary approach to paediatric radiotherapy treatment in a low-middle income country	Isobel Pugh, Alice Spencer, Dr Rimpa Achari	Leeds
2) Caregivers of Children with Cerebral Palsy in Antananarivo, Madagascar: An Investigation into their Knowledge, Challenges in Accessing Care and Unmet Needs	Freya Resendez, Prof. Anne Chamberlain	Sheffield
3) Do Paediatricians recognize paediatric obesity?	Emily Stewart, Dr E Ferguson	Sheffield
4) An Exploration into The Barriers and Facilitators of the Implementation of Kangaroo Mother Care as a Facility-Based Service Through the Perceptions of Health Care Workers in Rugarama Hospital, Uganda Using Semi-Structured Interviews	Rebeka Batty	Leeds
5) The Priority Health Issues and Key Health Determinants of Detained Filipino Children	Rosemary Blount, Dr Stephen Pearson	Leeds

Paediatric Awards for Training Achievements

The Paediatric Awards for Training Achievements (PAFTA) was established to recognise the hard work and achievements of colleagues in paediatrics.

Nominees will be colleagues who go the extra mile, look after colleagues – peers and trainees, particularly helpful team members and are inspiring role models.

There are 4 categories of nominations – Junior Trainees (ST1-ST3), Senior Trainees (ST4-ST8), ANPs, Educational Supervisors. All nominees will get a certificate and winners will be announced on the day. Winners will be nominated for the National PAFTAs which will be given during the national conference next year.

Following are this year's nominations in all the categories.

Congratulations to all nominees!

Junior Trainees	Senior Trainees	ANP	Supervisor
<ul style="list-style-type: none">• Laura Cooper• Edward Plenty• Ella Dzora• Melody Redman• Aaron Phua• Daniel Roberts• Laura Reeks	<ul style="list-style-type: none">• Irina Bacilla• Alex Damazer• Fatima Aliyu• Harriet Barraclough• James Houston• Hani Gowai• Umberto Piaggio• Mathumoli Ranjan• Matthew Buck• Ben Richardson• Shravanthi Chigullapalli• Manju Chadwani• James Blythe• Maddy Hover• Tricia Barlow• Yousef Gargani• Monica Negoita• Alex Tattersall• Alix Fonfe	<ul style="list-style-type: none">• Helen Cook• Gillian Falloon• Alison Wolfenden• Clare Goulding• Carol Hudson• Ellis Jones• Heather McMillan• Corene Tobin• Dawn Hare	<ul style="list-style-type: none">• Rum Thomas• Nicola Jay• Edna Asumang• Sam Oddie• Chris Smith• Shimona Basu• Diarmuid Kerrin• Kathryn Johnson• Kathryn Green• Rupa Talekar• Bryonnie Scott

Stands

Health Education of England

Rachel Noble, Sara Bower and Leanne Thompson



"Health Education England (HEE) exists for one reason only: to support the delivery of excellent healthcare and health improvement to the patients and public of England by ensuring that the workforce of today and tomorrow has the right numbers, skills, values and behaviours, at the right time and in the right place."

"Our vision is to provide the right workforce, with the right skills and values, in the right place at the right time to better meet the needs and wants of patients."

Website: <https://www.hee.nhs.uk/now> and in the future.

Training Programme Director

All paediatric training programme directors can be contacted for advice regarding training and rotations with clinics held across the region. Full contact details are available on:

<https://www.yorksandhumberdeanery.nhs.uk/paediatrics/school/contacts> [links](#)

ECG project stand (Dr. Prasad - ST7 spin cardiology registrar)

"The stand is to provide awareness about an ECG project we are undertaking. It is to encourage trainees to participate in a survey we have created and go through an ECG teaching module".

Over the wall

A charity that provides life-changing residential activity camps for children and young people who are currently receiving treatment or experiencing health challenges.

Website: <https://www.otw.org.uk/>

The RCPCH Quality Improvement

Dr Megan Peng, Quality Improvement Manager at RCPCH.

"Megan joined RCPCH in 2018 from paediatric specialty training and has coordinated the dissemination and spread of the Situational Awareness For Everyone (SAFE) programme and led on the diabetes QI collaborative, now entering its 8th wave with 58 paediatric diabetes teams undergoing a 9-month course of formal QI training. The RCPCH launched EQIP, an epilepsy QI collaborative this year and the QI portfolio now also encompasses further development of QI Central, Paediatric Care Online and Medicines for Children. Find out more about these projects and how you can get involved!"

SuppoRTT May Teng

May works for HEE as part of the Supported Return to Training Programme (SuppoRTT). This offers support to doctors returning to training after taking time out.

SPRAT

Senior Paediatric Regional
Advanced Training

Training Tomorrow's Consultants

Dear ST6-ST8 fellow trainees,

Firstly, welcome to the Yorkshire and Humber deanery or alternatively congratulations on deciding to stay in what is clearly the best region in which to live and train.

This is an invitation to SPRAT - the senior paediatric regional advanced training programme.



SPRAT is a non-mandatory, trainee led teaching programme that operates across Yorkshire un predominantly in Sheffield, Leeds and Hull although other venues are also used. Whilst not mandated, evidence suggests strong attendance at training days from our trainees, with excellent feedback.

The schedule offers around 20 teaching days each year that are specifically targeted to areas of interest for senior trainees and they directly map to the RCPCH level 3 curriculum. The sessions are on a rolling basis so that typically a trainee should be able to access all sessions during their 3 years of higher training. The topics are broad covering clinical, leadership and management subjects with generally two level 3 safeguarding days annually. The programme can be accessed by following the link:

https://www.yorksandhumberdeanery.nhs.uk/sites/default/files/updated_sprat_timetable2_-_2019_5.pdf

As this is trainee led, the programme and structure is evolving based on feedback, so that we can provide the best and most relevant topics. Feedback at the sessions or directly to the SPRAT committee is most welcome.

Alternatively, if you are interested in joining the committee, have suggestions or wish to assist organizing a session please contact us at:

sprat@bthft.nhs.uk.

We look forward to seeing you soon at our next training days.

With warm wishes,

SPRAT committee

Royal College Exams



"The stand will showcase the MRCPC exam course which is run by trainees as part of STEPP for ST1-3s. We will have the dates of next year's exam courses and recommendations for revision material".

Research design service



The Research Design service "provide free advice and support to researchers developing app| care research proposals".

"We can help you develop your ideas, provide access to a range of specialist expertise and support you to submit a high quality research proposal".

The RDS will be present and colleagues attending can submit online a summary of any research proposals they'd like to discuss further on the day.

There is an online RDS Request for Support for those who are interested in taking a project further:

<https://www.rds-yh.nihr.ac.uk/contact-us/request-advice/>

Alternatively email: rds-yh@sheffield.ac.uk or phone: +44(0)114 222 0828

Thank you

Thank you to this year's organising committee for their hard work.

Workshop team

Rushna Raza
Sadaf Naseer
Olivia Parker
Hannah Hilton

Poster team

Amy Talbot
Angie Villa
Kristina Lotha
Allison Low

Abstract team

Fadi Maghrabia
Jo Hemingway
Manorama Gadde

Medical student team

Verena Walsh
Zainab Ezimokhai
Amy Henderson

Advertising

Reena Basu
Geetanjali Arora

Conference Pack

Surochana Channappaiah
Elizabeth Gregson

Stands team

Olivia Taylor
Hadeel Aleesha

PAFTA team

Megan Lynn
Francis Kyeyune