

New Workforce Models – Keeping You Informed Edition 14

Your Guide to **SWeET** **S**trategic **W**orkforce **E**ducation and **T**raining

This edition of the 'Keeping You Informed' bulletin explores the **Certificate of Eligibility for Specialist Registration (CESR)**, an alternative way of developing our Specialty Doctors to become Consultants.

Dr Iain Dods – Director of Medical Education



One of the roles of Director of Medical Education is to support and development of doctors employed by the Trust. Many of our doctors are in a prescribed training program that upon successful completion leads to them being eligible for a Consultant or GP post.

An often forgotten but important part of the medical workforce are the Staff and Associate Specialist doctors (SAS) that make up around 20% of the NHS medical workforce. In the Trust, we have around 70 doctors in this role who provide high quality clinical care on our wards, in our clinics and our operating theatre.

SAS doctors are a diverse group of clinicians with significant skills, knowledge and may operate at a senior level independently. Others may have other

completed part of their training but have taken a break from their speciality training through choice, caring responsibilities, career breaks and many other reasons. They may have significant postgraduate experience and postgraduate qualifications.

At Chesterfield, we are aiming to recruit and retain SAS doctors to help them develop their career whilst providing a stable and experienced medical workforce. For some this will be by helping get into speciality training, gain new skills and responsibilities but as we our highlighting today we are developing grow our own Consultants of tomorrow by helping our SAS colleagues gain the knowledge and skills within an organised internal training programme.

In many specialities, such as Emergency Medicine, there are shortages of specialists to provide service and the cost of locums is high.

I am delighted to highlight the work that Dr Laura Buxton, Consultant in Emergency Medicine, has done to help fill the shortage of emergency medicine specialists at the Trust.

Laura Buxton, Consultant in Emergency Medicine

“It was around five years ago when Dr Dan Boden, Consultant in Emergency Medicine at the Royal Derby Hospital began offering long term locums in Emergency Medicine trust doctor posts, with the promise of in-house training in order to facilitate their career progression with the ultimate goal of undertaking a Certificate of Eligibility for Specialist Registration (CESR). We have been running this programme of training here at Chesterfield Royal since 2015 and so far have recruited four full-time CESR trainees who were either previously working as locums, staff grades or trainees in other specialties.

“This unique training opportunity is an alternative path towards becoming a consultant that deviates from traditional Higher Speciality Training. The programme is designed to be tailored to the individual Doctor’s training requirements and involves them working across both emergency medicine and four host specialties of acute medicine, paediatrics, anaesthetics and intensive care. This allows them to gather experience and competence as evidence of their

capacity to progress through training, with the aim of becoming a consultant in emergency medicine. This training is, in the main, undertaken in this trust, which suits lots of individuals who for whatever reason are committed to working in one location.

“Some individuals are less well-suited to a traditional training route, which can be very challenging in terms of time pressures to complete and a wide geographical area in which to train. They find this bespoke version of training, which is flexible to their specific needs, much more manageable whilst at the same time being able to continue to train and develop professionally. CESR training allows Doctors to rotate between emergency medicine and host specialties within this hospital but is also flexible enough to incorporate additional training at other local hospitals if desired and appropriate.

“The Royal College of Emergency Medicine set down the necessary requirements to demonstrate CESR capacity using both retrospective evidence from within the last five years and prospective evidence gathered during their CESR training.

“I’ve developed a four-year CESR programme but the beauty of it is that it is bespoke. If one of our trainees needs a bit of additional time to gather evidence or complete their paperwork for example, we can easily flex to extend their training. By the same token, if someone joins the programme who can prove that they already have sufficient experience and competencies in a particular area, then they can reduce the amount of time required to complete their CESR training.

“This programme benefits the individual Doctors by helping them to progress their careers and develop themselves as trainees; it benefits the emergency department because we grow our own team into more highly qualified, experienced, loyal trainees who appreciate our investment in them. The longer term benefits for both the ED and the Trust are that we are investing in individuals who may one day grow into our local Consultant workforce.”



Elaine Mellor – Specialty Doctor

One of the Specialty Doctors who has taken advantage of this new route towards becoming a Consultant is Elaine Mellor. Elaine started her ACCS (Acute Care Common Stem) training at Royal Stoke Hospital but, living in Sheffield, found the upheaval too difficult to maintain. After one year she took the difficult decision to leave and take up her CESR training position here at the Royal.

Elaine Mellor – Specialty Doctor

Elaine said: “Your specialty is determined by rotation and it can be very disruptive to your home life, particularly being that I’m a mature graduate with a family. Here I’m able to work a specialty for three months out of nine over a four year period to be able to work towards the goal of becoming a Consultant. So far I’ve spent three months with paediatrics, the same in acute medicine and am planning to spend my next rotation in Intensive Care.

“I have to provide evidence of my capabilities and have been able to show that I already have rotation experience in Anaesthetics through previous work. Laura has been great in co-ordinating my programme and was able to secure my paediatric placement at Sheffield Children’s Hospital thanks to her links with Consultants there. I have been on the programme for 18 months and have completed two rotations so that’s it for this year. Laura is helping to plan for my time in Intensive Care, probably next year.



“When I complete the four years I have to prove all of my competencies and will still need to pass the exams if I want to be a Consultant, alongside the evidence I’m able to collect to prove to the Royal College and GMC that I’m at the required level. It’s an alternative path but certainly not an easier one as it’s difficult to fit in the study time alongside your full time job. That said, for people in my situation with ties and commitments to a certain place, it’s a more palatable option as opposed to the disruption that geographical rotation can create and I’m grateful of the chance to further my career in this way.”

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