

Survey of Paediatric Anaesthesia Experience Amongst East of England Trainees

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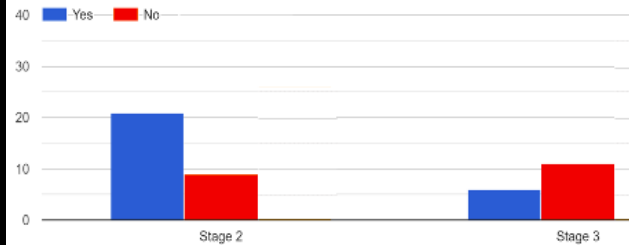
Aim: To understand paediatric anaesthesia training needs from trainees' perspective in the region.

Method: An online survey was conducted from 20th February 2023 to 20th March 2023, targeting exposure and perceived gaps under the 2021 curriculum specific to paediatrics. An anonymous Google Form was sent to 315 anaesthetic trainees via school and college tutors, with 56 responses (18%) received. 46% of respondents were Stage 1 residents, 36% were Stage 2 or equivalent, 14% were at a Stage 3 level, and the rest responded as other.

Conclusion: We noted that there is a definite training gap, particularly in District General Hospitals (DGH), where there is limited exposure to complex cases and infants/neonates. There is clearly a need for more focused educational sessions and simulation-based training to ensure competency development across all areas of paediatric anaesthesia. This is supported by recent NAP7 findings, which calls for greater access to regular MDT training in managing critically unwell children. Furthermore, there is a greater need for deliberate entrustment and supervised autonomy at higher levels of training to better prepare trainees for independent clinical practice.

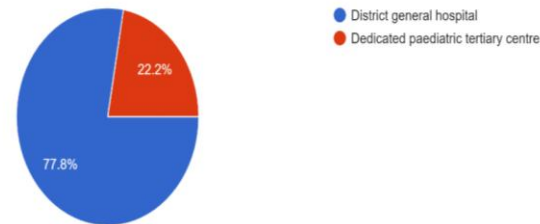
Results

Are you on track to achieve your paediatric key capabilities for your stage of training?



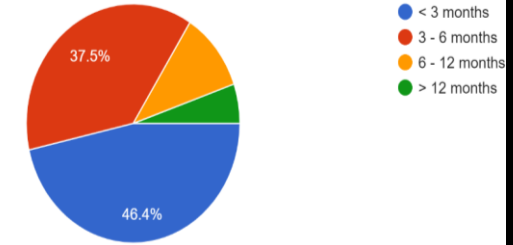
If you have answered yes to the previous question, in which hospital setting were/will these key capabilities be primarily achieved:

36 responses



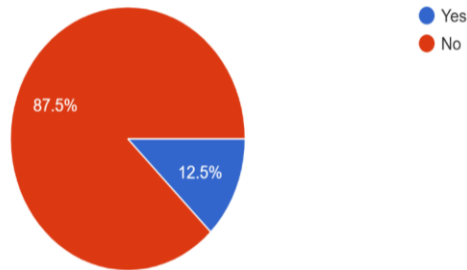
Time spent in paediatric anaesthesia in total

56 responses



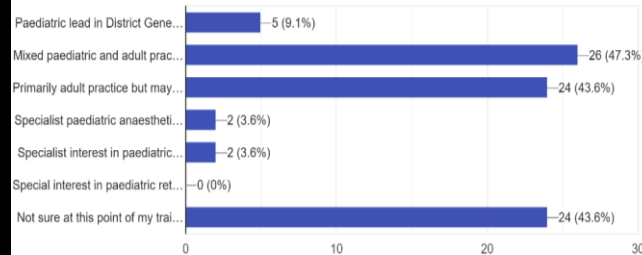
Have you worked in a PICU setting?

56 responses



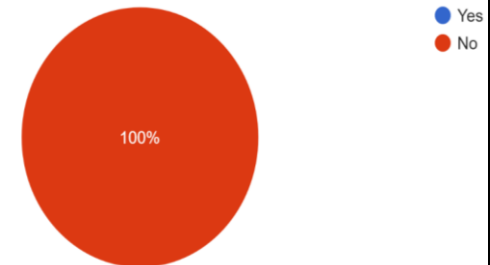
On completion of training, to what degree do you envision your involvement in paediatric patients as a consultant anaesthetist. (tick all that apply)

55 responses

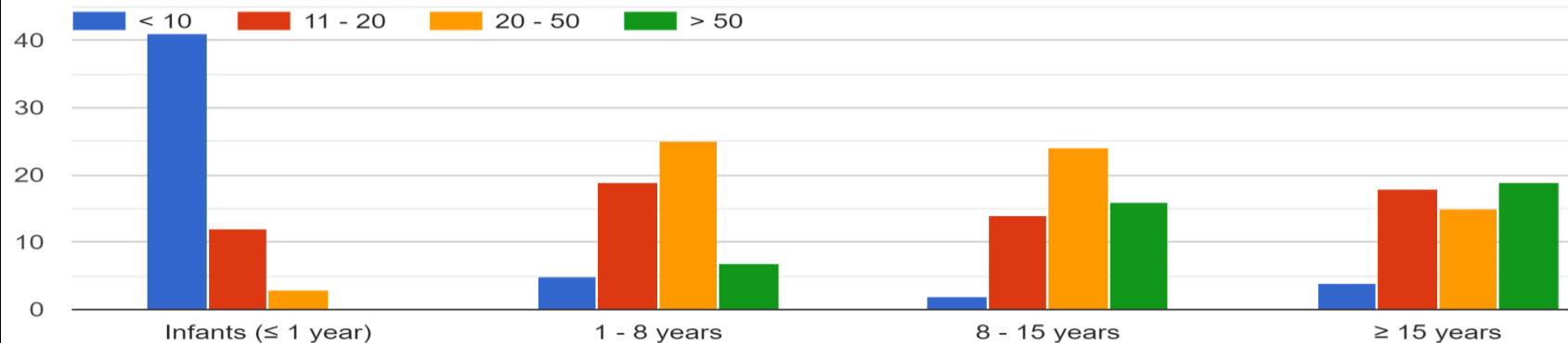


Have you done a paediatric transport retrieval post?

56 responses



Please state the number of paediatric cases you were been involved in the following age groups (either in theatre, ED-resuscitation area or PICU setting)



Trainee Concerns in Paediatrics

- **Life support algorithms** – Need for regular updates and practice.
- **Paediatric emergencies** – Limited exposure to critical cases.
- **Airway skills** – Lack of hands-on experience, especially with intubation.
- **Cardiac defects** – Unfamiliarity with managing congenital heart disease.
- **Neonates & infants** – Challenges in assessment and early recognition of illness.
- **Parental anxiety** – Difficulty managing distressed parents during emergencies.
- **Hands-on exposure** – Reduced opportunities in DGH settings.
- **De-skilling** – Concerns about losing confidence and competence over time.

Paediatric Anaesthesia Training Enhancements

- **Supervised Exposure:** Increased ‘coffee room’ supervision to encourage reflective learning.
- **Simulation:** Regular training in paediatric emergencies and crisis management.
- **Mandatory Rotations:** Tertiary paediatric centres, PICU postings, and paediatric transfer experience.
- **Academic Teaching:** Focused sessions on paediatric emergencies and trauma team involvement.
- **Neonatal Anaesthesia:** Structured exposure to neonatal-specific cases.
- **Pain Management:** Training in regional blocks and multimodal analgesia.
- **Communication:** Skills development for interacting with children and families.

Acknowledgement

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- College tutors – EoE region
- Trainees

Reference

Taieb J, et al. Anaesth Crit Care Pain Med.

2022;41:101117.

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accpm.2022.101117](https://doi.org/10.1016/j.accpm.2022.101117)

“Please consider encouraging trainees to perform cases under local supervision. This should reinforce mutual trust and build confidence that straightforward cases can be addressed and managed”- Trainee’s comment

Teaching Priorities As Rated by Trainees

Area of teaching / simulation	Strongly required or required
Paediatric Airway	64%
Neonatal Anaesthesia	46.4%
Shared airway	57%
Paediatric Trauma	55.4%
Time critical transfers	26.8%
Paediatric Emergencies	64.3%