

RCPCH

A Career In Paediatrics and Child Health: What You Need To Know

RCPCH Youth Advisory Panel



www.rcpch.ac.uk/cayp-careers

Royal College of Paediatrics and Child Health

“The most rewarding parts of the job come from using everything you’ve learnt along the way to make a difference to a sick child and their family. There’s an intellectual challenge, and a lot of fun to be had from working with some really interesting and diverse people.”

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QUALIFICATIONS & UNIVERSITY

What qualifications do I need?

The qualifications required to get on to an undergraduate degree course in medicine can differ from university to university. You should check the universities to which you are considering applying for more detail. Most universities still require high grades at A-Level for entry to a medical degree course and there are an increasing number of courses that are designed for graduates from other degree courses.



In general you will need to take A-Level Biology and Chemistry along with another subject. Some universities exclude subjects such as General Studies so it is important to check your choice of A-Levels with different universities before making your final selection. You may also have to go for an interview prior to being accepted on the course so good communication skills and preparation are advisable in this instance. Both the UCAS and NHS Careers websites have more details on entry requirements and you should speak to a careers advisor/Connexions for more information about your university application.

There are other routes if you do not have the required A Levels. Some universities offer a foundation course that last a year which will prepare you for the full time medicine course and there are an increasing number of universities that are encouraging applications from students from schools that do not have a strong academic tradition in order to increase diversity in the medical student intake.

www.nhscareers.nhs.uk/details/Default.aspx?Id=556

www.ucas.co.uk

www.connexions-direct.com

Work Experience

Work experience offers the opportunity to have a realistic understanding of what the role entails and what working conditions are like. It can be difficult to gain work experience in a hospital due to restrictions regarding age (most hospitals will only accept people over 16 years) and all individuals need to have Criminal Record Bureau (CRB) clearance to ensure patient safety and confidentiality. It is worth enquiring through hospital personnel departments if they do offer placements or whether there are other roles you can do such as volunteering or being a porter.

If hospital based work experience is unavailable other placements can be equally valuable and well received by medical schools and universities. These include gaining experience with children and young people in a youth work setting, projects for people with disabilities or learning difficulties and children's groups such as cub scouts or after school clubs. These can be a great way of developing your communication skills and rapport with children and young people.

“Work experience in hospital is a good way to establish your interest in paediatrics - but it can be hard to come by. Lots of paediatricians spent some time before university volunteering with children's charities or helping on summer camps - I think it helps to know that you enjoy working with children.”

Which University do I choose?

There are approximately 30 universities across the UK where you can study medicine. A full list with further details can be found at www.ucas.co.uk. Just go to course search and then search for 'medicine.' Most courses are 5 or 6 years full time. For information on how many spaces are available at different universities take a look at med school online:

www.medschoolsonline.co.uk/index.php?pageid=78

University Open Days

Most universities will hold Open Days where you can visit the university premises, talk to staff in the subject you are interested in and find out about what qualities they are looking for in potential students. You should look on individual university websites for details of their Open Days and how to register.

Summer School Programmes

Some universities have summer school programmes offering young people the opportunity to get a taste of life as a medical student. A few we know about are listed below or contact your university of choice to find out if they also have a summer scheme.

Sheffield University: Sheffield's Outreach and Access to Medicine (SOAMS) programme: www.shef.ac.uk

Dick Whittington Summer School: For Year 11 students based in London: www.pcps.ucl.ac.uk/dickwhittington/

University of Bradford: www.aimhigheryandh.co.uk

www.suttontrust.com

www.medilink-uk.com



How much will going to university cost?

The cost of university education for UK students consists of tuition fees (currently £3070 per year), accommodation and expenses such as food and bills plus some entertainment! The fees can differ depending on your circumstances, where you apply and are different if you are an overseas student. Check the university websites for individual details. There are a range of scholarships and bursaries that are available but these vary between universities. Most students take out a student loan during their studies which is offered at a low interest rate and only starts to be repaid when the student is in full-time employment earning greater than £15,000 per year.



How much debt will I have?

Medical students have less free time than those on other courses and so can have less chance to earn some extra cash through a part-time job. They are also studying for two to three years longer than the average student and could therefore end up with double the debt. A British Medical Association (BMA) survey in 2006 revealed that the average debt of a medical student is £21,000. How soon a debt is paid off is really down to you, how you manage your finances and what you earn – the same for all students.

For more information on funding scholarships, maintenance grants NHS bursaries and whether you might be eligible for financial support have a look at some of these websites:

- www.hotcourses.co.uk
- http://www.aimhigher.ac.uk/student_finance/2007.cfm
- <http://www.nhsstudentgrants.co.uk/>

"I found my student years some of the most enjoyable of my life. True, money was short but as a life experience it was great. I met a whole host of new friends both medics and non-medics, developed my own independence and met my future wife!"

* Average level of debt among final year medical students passes £21,000. BMA Annual Medical Student Finance survey. www.personneltoday.com 09 November 2006

Medical Student Profile.

Lauren Young, 23, is studying at the Royal Free and University College London and is in Year 6 of her medical degree.

Medicine is a perfect mix of science, problem solving and interaction with people, and it's the people who are fascinating. I wanted to be able to make a difference to people's lives using my knowledge in a more hands-on way. For my career plans I am aiming to specialize in paediatrics but there are so many different jobs within medicine and that really appeals. You have so much time to decide which specialty is right for you. Of course, medicine also offers worldwide opportunities for jobs.

What did you have to do to get on your course:

UCAS application and interview. Work experience was recommended.

Average time per week studying:

About 8 hours a day, Monday to Friday (either in the hospital on wards, or reading), significantly more at exam time!

Average free time per week:

About 4-5 hours each evening and most weekends.

What is your main source of finance:

Student Loan Company, bank overdraft and parents.

Is the course what you expected:

I didn't expect 48 week terms in clinical years, but otherwise yes.

What do you really enjoy about the course:

As a medic you are in a very privileged position, patients will often tell you their deepest worries. Speaking about peoples' most intimate details and

being trusted with such information is very humbling. The social life is amazing too, in such an intense course, you make brilliant friends.

What are the negative aspects?:

Occasional 7.00am ward rounds, sometimes feeling like a spare part when things get busy and accumulating a fairly large student debt.

Do you have any tips or advice:

I wholeheartedly recommend medicine as a career but it isn't easy. It requires a lot of learning and studying for exams. Despite this, you see such amazing things and they continue to motivate you throughout the course. Definitely do some work experience. Trailing round after a very busy consultant won't be nearly as useful as working with patients directly, sit down and talk to people on the wards and spend time with different professionals. Communication skills are something which takes practice and any time spent volunteering with patients or at residential homes for example, will be very useful both for your interview and later on in medical school.

A day in the life of a medical student:

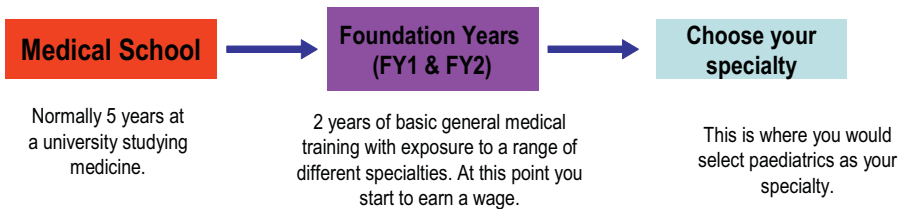
For the first few years my time was mostly spent in lectures, tutorials and practical sessions, including examining mock patients. I was usually in college from 9 til 4 Monday to Friday, except Wednesday afternoons for sports or any activities you wish. My free time was spent socializing, either in the student union, around London or playing sport.

In my last clinical year, a typical day would start at 8.30am with a ward round. They vary in length, but hopefully you can have a cup of tea and some informal teaching around 11am. Lunchtimes are often spent at meetings, with the added bonus of a free lunch with the teaching! My afternoons are usually spent in theatres, in clinics or helping the junior doctors, who in return will teach you practical skills or help you perfect your examination technique. In the evenings I try to look up things I didn't understand during the day, and then catch up with my friends.

BEING A PAEDIATRICIAN.

It takes most paediatricians about 10 years of post-graduate training (i.e. after your medical degree) before becoming either a hospital or community-based consultant. The diagram below shows the training route from medical degree to consultant with a brief explanation of what is involved at each stage. There are some opportunities for a career in paediatrics below consultant level, particularly in community child health.

Paediatric training pathway



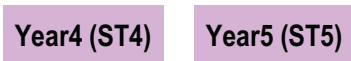
Level 1 Paediatrics



These 3 years form the basic training in paediatrics, ensuring you have the basic knowledge and skills. You are assessed by the MRCPCH* examination and assessments within the hospital or other workplace setting.

* Membership exam for the Royal College of Paediatrics and Child Health

Level 2 Paediatrics



These 2 years form the basis of higher specialist training in paediatrics. Trainees enhance their knowledge and skills and gain competencies in three particular areas – neonates, community child health and acute paediatrics. Assessed in your workplace.

Level 3 Paediatrics



During these 3 years trainees deepen and strengthen their skills in general paediatrics or specialise in one of the paediatric sub specialities (see list of specialities.)

Different positions and variety in paediatrics.

The majority of paediatricians work in district hospitals looking after babies and children with both short term (acute) and longer term (chronic) illnesses. Some work outside hospitals with children who have disabilities or other special needs, or with general health issues such as immunisation and allergies. This branch of paediatrics is called community child health. A small number of paediatricians will work in one sub-specialty, such as neurology or gastro-enterology, in a teaching or children's hospital.



Major Paediatric Specialties

General Paediatrics:

This is the largest group of paediatricians. General paediatrics is the care of children in hospital. Sick children can have simple or complex diseases and the paediatrician needs to know how to manage these independently or by working with other colleagues. Routine work includes seeing children in Outpatients Departments, emergency work on the wards or sick babies in special care baby units. Other tasks

are teaching and training, administration such as writing letters and reports, talking to families and other health professionals. *“Everyday is different and a wonderful challenge.”*

Neonatal Paediatrics (Neonate means a baby under 4 weeks old):



While most hospital paediatricians look after sick newborn babies in special care baby units, neonatologists specialise in the care of the sickest and most premature babies in neonatal intensive care units. There tends to be one such intensive care unit covering for five or six local hospitals, often in teaching hospitals.

Community Child Health:

Community Child Health services complement acute hospital services in providing care for children with long-term conditions. These could include learning difficulties, hearing impairment and services for children with behaviour problems (E.g. attention deficit hyperactivity disorder and autistic spectrum disorders).

Paediatricians can also be involved with safeguarding children and child protection. Child public health is an emerging specialty, which considers the health of the whole population (E.g. immunisation and health promotion programmes).



Paediatricians with these interests will generally work outside hospital settings, with a multi-disciplinary team. Some may also undertake acute on-call duties, and some will have very specialist roles (E.g. children's palliative care, adoption and fostering or providing specialist services). See www.bacch.org.uk for more information.

Smaller Paediatric Specialties

There are a number of smaller specialties with fewer posts and therefore much more limited training opportunities. Most of these specialist posts are based in teaching hospitals.

Child and Adolescent Mental Health:

For more information about training as a child psychiatrist see the Royal College of Psychiatrists for information www.rcpsych.ac.uk. Since chronic illness inevitably has an effect upon mental health there is an element of this in all paediatricians work and many undergo additional training provided by the RCPCH for this purpose.

Emergency Medicine:

Another growing area of paediatrics, dealing with the care of children in accident and emergency departments. This can mean those who have suffered accidents and need immediate treatment.

Endocrinology:

This specialty treats children and young people with illnesses linked to their hormones (endocrine system.) This system regulates metabolism and growth and development. This area of paediatrics treats children with conditions such as diabetes and the much rarer hormonal problems of childhood, such as growth failure. All local hospitals will have one or two general paediatricians who look after the local children with diabetes.

Gastroenterology, Hepatology, & Nutrition:

Gastroenterology is the management of children with problems in the digestive system, such as the stomach and the intestines. Hepatology is the study and treatment of disorders the liver. Nutrition is important as some children need special diets in order to manage their condition. An example of this would be Crohn's disease (see www.crohns.org.uk).



Immunology, Allergy and Infection:

This deals with infectious diseases and their effects on the child, which can be complicated by the child's immune system (how the body defends itself) and whether it can work against the disease or infection. HIV and AIDS are major parts of the workload. It also covers children who experience severe allergic reactions.

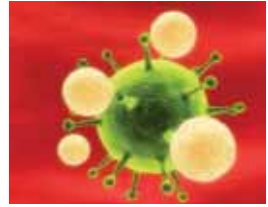


Illustration of killer cells attacking a virus

Nephrology:

Dealing with problems in the kidneys and urinary system (bladder and going to the toilet), including kidney transplantation and dialysis (helping the kidneys remove waste products from the blood.)

Neurodisability:

A growing area of community paediatrics, dealing with children with life-long neurological problems such as cerebral palsy or after brain injury.

Neurology:

The care of children with problems in their nervous systems, such as epilepsy or difficulty with movement.



Oncology:

The treatment of children with cancer such as leukaemia and tumours. A doctor who specialises in cancer is called an oncologist and they are concerned with the diagnosis, development, treatment and prevention of the disease.

Paediatric Cardiology:

This is the management of heart problems in children and young people. This still tends to be a sub-specialty of (adult) cardiology rather than paediatrics and training is supervised by the Royal Colleges of Physicians. For more information visit www.rcplondon.ac.uk

Pharmacology:



A small speciality dealing with how medicines work in children, and how doctors should use them. This includes working out the right dosage for a child and looking at side effects and the overall effectiveness of medicines.

PICU:

This stands for Paediatric Intensive Care (Unit.) It is the care of the very sickest children in regional units. Many have to stay in hospital for long lengths of time and may not recover.

Respiratory:

This deals with problems with breathing and the lungs, which includes conditions such as severe asthma and cystic fibrosis.



Rheumatology:

The care of children with joint problems. These may be severe and include long-term problems such as childhood rheumatoid arthritis.



What's it like on an average day?

Consultant paediatricians are contracted to spend 75% of their time seeing patients on wards or in clinics. The other 25% is spent doing other activities such as teaching and administration. Paediatricians that we have asked have said that every day is different and can include seeing patients, research activities, doing paperwork and being involved in meetings to develop new ideas and projects.

See www.rcpch.ac.uk/cayp/careers-info/ for details of an individual paediatrician's working day.

How much will I earn?

At present starting salaries are approx £22k for doctors in training level, rising to over £95k as a top level consultant. Salaries do not differ too much between locations in the UK. There is less opportunity for private practice in paediatrics than in many other specialties.

For more info look on the British Medical Association (BMA) website: <http://www.bma.org.uk/ap.nsf/Content/DDRBfact20078>

Is it really stressful?

Paediatrics is probably neither more nor less stressful than other branches of hospital medicine. When asked about their least favourite part of the job many paediatricians say the distress of seeing a child in pain or terminally ill is upsetting. However, they also add that the best part of the job is seeing a sick child get well again.

"It's possible to cope (and even thrive) with this by communicating well with the team in hospital and with the child's family, by being organised, and by doing the best job you can. Junior paediatricians are very well supported by their bosses."

What's the average length of a working week?

Typically doctors work on a shift system, which includes nights and weekends but by 2009 the average weekly hours worked should not be greater than 48 hours.

For more information look at the Royal College of Physicians website www.rcplondon.ac.uk/college/statements/ewtd_caseforten.asp

Does paediatrics have any perks?

Working as a paediatrician brings with it a great deal of personal rewards such as interacting with children and their families. Paediatricians have the satisfaction of dealing with acutely ill children who generally recover quickly and return to full health. It is particularly satisfying to see small vulnerable infants grow into healthy children.

Hospital medicine provides well paid and secure long term employment and a generous pension package too. There is also a good track record for part-time employment and flexible working.



Annual Leave and Career Breaks.

Guidelines show that junior doctors get 6 weeks of holiday and 30 days of study leave each year. During the later stages of training it is possible to take time out of a training programme to pursue research or gain experience working in a different setting (e.g. working abroad).

Quite a few doctors work abroad as part of their post-graduate training. Specialist training is recognised throughout the European Economic Community but it is uncommon for doctors to move having completed their training.

Other websites you might find useful include:

<http://www.wanttobeadoctor.co.uk/>

<http://www.money4medstudents.org/>

If you are still interested in becoming a paediatrician we recommend you talk to a careers advisor and your family about the information you have read in this booklet.

Good luck!



www.rcpch.ac.uk



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