ROLE MODEL

Eileen Burns

The consultant geriatrician talks to Kathy Oxtoby about her passion for, and determination to improve, older people’s care.

When Eileen Burns was looking at prospectuses to apply to medical school, her father was cautious about her choice of career. “He said, ‘Eileen, it’s not what you know but who you know.’ But mum’s response was, ‘Shut up, John. She can be anything she likes.’”

Burns has proved her mother right. A consultant physician at the Centre for Older People’s Medicine at St James’ Hospital, Leeds, she is the national specialty adviser for older people’s integrated care to NHS England. She is also a former past president of the British Geriatrics Society (2016-2018) and was awarded an MBE for services to integrated healthcare for older people in 2019.

Burns loves caring for older people because “they often have such fabulous life experiences, can be full of fun—even in the face of adversity—and can teach us so much if we give them the time.”

She enjoys being part of a multidisciplinary team. “Everybody in the team has a crucial role to play in helping to develop care plans, which are firmly rooted in what each patient wants to happen. “We all work together to carry out comprehensive geriatric assessments that provide older patients with the best chance of staying in their own homes and communities.”

Burns grew up in Consett, County Durham, in a community where the main employer was the steelworks, where her father worked. Educated at the local comprehensive school, she decided to combine her love of science and people and become a doctor. Her earliest medical role model was her GP. “He was kind and warm, and you sensed that he gained real job satisfaction in trying to do his best for people, which I found inspirational,” she recalls.

Burns did both her preclinical and clinical training at Leeds University and two teaching hospitals—St James’s Hospital and Leeds General Infirmary—in the late 1970s and early 1980s. During her senior house officer training she particularly enjoyed her experience of geriatric medicine—a new specialty at that time—and the opportunity it gave her to focus on holistic care. She was inspired by consultant role models—“the standard bearers for geriatric medicine”—who were involved in developing community services for older people in Leeds.

After doing a research degree in the measurement of liver blood flow at the University of Sheffield she trained to be a consultant geriatrician, qualifying in 1992, the year the first of her three children was born.

Burns also finds teaching rewarding. She has overseen training for geriatricians in the region, and developed teaching programmes for non-medical staff to help them gain expertise in older people’s care, particularly those living with frailty.

She has helped to develop community geriatric services in Leeds and, in her role as national adviser, is currently developing integrated neighbourhood teams to provide proactive support for frail, older people.

There is so much more to be done to improve the care of older people, she believes. “We haven’t changed the NHS anything like as much as the demography of the country has changed. There are so many more older people and we know they would rather be cared for in their communities than in hospital, so we need to think hard about how we can offer more services for them in, or near, their homes.”

Now in the later stages of her career, she reflects on the value of finding a specialty you love. “We’re consultants for a very long time, so choose a discipline you enjoy and gives you satisfaction. I found geriatric medicine, and it’s the right specialty for me.”

Kathy Oxtoby, London

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