The Faculty of
Intensive Care Medicine

ICM Unit Brief

Part 1  Hospital Details

1.1 Hospital name
ROYAL SHREWSBURY HOSPITAL

1.2 Full address (you must include postcode)
Mytton oak Road
Shrewsbury
Shropshire
SY3 8XQ

1.3 Hospital Telephone number
01743 261000

Part 2  ICU Department contact details

2.1 Direct telephone number to Department
01743 261148

2.2 Faculty Tutor name
Dr WINDSOR

2.3 Faculty Tutor Email address
Alastair.Windsor3@nhs.net
**Part 3  Unit Structure**

3.1 Number of Beds

<table>
<thead>
<tr>
<th>Clinicians</th>
<th>Role (eg clinical lead, consultant)</th>
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<tbody>
<tr>
<td>Dr Omu Davies</td>
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<tr>
<td>Dr Mike Dixon</td>
<td>Equipment</td>
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<tr>
<td>Dr Rob Law</td>
<td>Antibiotic stewardship</td>
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<tr>
<td>Dr Fiona Jutsum</td>
<td>ICNARC data &amp; follow-up clinic</td>
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<tr>
<td>Dr Simon Hester</td>
<td>Telford ITU lead</td>
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<tr>
<td><strong>Dr James Moon</strong></td>
<td><strong>Clinical lead</strong></td>
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<tr>
<td>Dr Ashley Miller</td>
<td>Ultrasound (ICS ultrasound chair.)</td>
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<tr>
<td>Dr Robin Hollands</td>
<td>M&amp;M review</td>
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<tr>
<td>Dr Chris Mowatt</td>
<td>AAGBI councillor, FI trainer trust lead, Editor; Fundamentals of Anaesthesia</td>
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<tr>
<td>Dr Stuart Booth</td>
<td>Clinical Governance</td>
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<tr>
<td><strong>Dr Alastair Windsor</strong> (Author of unit brief)</td>
<td>ACCP trainees, cardiopulmonary exercise testing</td>
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8 level 3 beds equivalents; (but typically 12 beds open)

3.2 Number of admissions

| 631; Jan 18-Jan 19 |

3.3 Percentage of elective vs emergency admissions

Around 20% of our admissions are elective.

3.4 Overview of case mix within the unit

>600 admissions per annum. 83% become unit survivors & ICNARC data shows us to be comparable to similar units.

General surgical emergencies. (Around 50% of our admissions are from surgical specialties and 50% from medical emergencies)

Orthopaedic emergencies
Colorectal.
Vascular.
Medical acute admissions from A&E and the wards
Oncology/haematology
Occasional spinal and orthopaedic patients from the RJAH orthopaedic hospital.

Major trauma goes to Stoke which is also our tertiary referral centre..

Note; we have a smaller sister unit at the Princess Royal Hospital in Telford which is mainly a medical ITU (approximately 90% of admissions) but it does look after our maxillo-facial and ENT work. If suitable, senior trainees can spend some time there mastering a day-time ‘consultant’ role honing difficult decision making with good support. It has a dependency of 6 and usually has 8-9 beds occupied with 380 admissions per annum.
3.6 Details of research projects being undertaken within the unit

We participate in the FLOELLA and NELA trial. A trainee would be expected to undertake a Quality improvement / audit project. It is anticipated some would be repeat QIs as evidence of quality control.

3.7 How is the unit staffed

There are two consultants on during the morning and just one in the afternoon. We have one consultant on-call over-night who has usually worked that daytime session. Below the consultant is a middle grade anaesthetist who maybe an anaesthetic trainee or an experienced anaesthetic speciality doctor.

Additional doctors include an F1 during the week days 8-5. Other staffing consists of advanced critical care practitioners. We have one currently in post and one in training.

Part 4 Training

1. Supervised and unsupervised ward rounds depending on experience
2. Echocardiography. Dr Miller now runs a bi-annual FICE / lung (CUSIC) u/s course for which we would welcome either attendance or teaching on. If you have not yet done the FICE certificate we will ensure you leave with it, and if so desired we can commence you on/or continue to support you towards the full British Society of Echocardiography qualification. Training and support will be given for accreditation for any desired FUSIC ultrasound module. There will be hands-on direct training with the ICS FUSIC chair. There is also an Intensive Care Ultrasound fellowship available. You can develop this skill beyond your peers with our in-house specialist expertise.
3. Teaching juniors.
4. Respiratory and cardiology teaching / clinics if so desired
5. Microbiology teaching
6. Cardiopulmonary exercise testing teaching/exposure
7. Experience with the Hamilton semi-autonomous intelligent feedback ventilation system.
8.ITU follow up clinics
9. Exposure to some management issues if at the appropriate level training
10. If a trainees requires a day a week away in another centre to continue/complete a project it can also be facilitated.

The Royal Shrewsbury Intensive care unit is an ideal location to gain experience in management issues relating to intensive care. We are friendly, work collaboratively and embrace change. There is significant opportunity to further career progression.

Very would be very flexible depending on trainee's requirements and experience. Specifically it offers an alternative style of unit to the large tertiary service unit and is a perspective that a potential ITU consultant should understand when applying for future jobs.
(We will certainly have future consultant post available in this pleasant county town with a high quality of life.)

Feel free to talk to us or visit us beforehand even if you are not yet certain this is the unit you wish to spend a DGH attachment on. Drs Alastair Windsor & James Moon
4.2 Details of departmental teaching days

Trainees are expected to participate in the regular weekly training of junior anaesthetic staff.

4.3 Details of clinical governance meetings and / or M & M

1. Bimonthly critical care organisational governance meetings – trainee is encouraged to attend
2. Monthly safety meeting
3. EGG - Bimonthly department meeting - M&M audit

4.4 Number of trainees on each tier of the rota

The only regular night tiers are consultant and middle grades. There will always be a middle-grade anaesthetic airway specialist covering theatres on-call so non-anaesthetic ITU trainees are welcome to apply.

We would expect a trainee to work 1 in 5 weekends and 1 in 8 week nights on call. Very senior trainees could be supported in a 24 hr supported consultant role (a consultant would always be available and on-call). Otherwise a 12 hr shift would be the likely model. Please discuss with us as we can accommodate a variety of working patterns subject to college approval because the role is supernumerary.