

The Faculty of Intensive Care Medicine

ICM Unit Brief

Part 1 Hospital Details

1.1 Hospital name

1.2 Full address (you **must** include postcode)

1.3 Hospital Telephone number

Part 2 ICU Department contact details

2.1 Direct telephone number to Department

2.2 Faculty Tutor name

2.3 Faculty Tutor Email address

Part 3 Unit Structure

3.1 Number of Beds

3.2 Number of admissions

3.3 Percentage of elective vs emergency admissions

3.4 Overview of case mix within the unit

Torbay ICU is a new, state of the art 14 bedded unit, which opened in March 2017. We currently provide 6 Level 3 and 4 Level 2 patient equivalents with a strategy in place to provide for 14 level 2/3 in the near future. We also manage 2 level 1.5 “Higher Care” beds for high risk orthopaedic admissions.

We are a mixed medical and surgical DGH general ICU.

Most recent data (2017):-

Total admissions last year = 901 (80% emergency)

Paediatric admissions last year = 28

We serve a diverse population in Torbay and our case load reflects this. Our catchment includes areas of significant poverty and we therefore care for above average numbers of admissions related to alcohol/IVDU/substance abuse.

3.5 Names of Consultants, roles and areas of interest

Name	Role (eg clinical lead, consultant)	
Richard Eve	Clinical Lead	EPR systems/Training, exams.
Jonathan Ingham	Patient Safety Lead	Training/Echo/Airway
Tod Guest	Faculty Tutor	Simulation/Human Factors
John Carlisle	Pre-assessment Lead	CPX/Pre-op assessment Service
Richard Walker	Outreach lead	Ethics
Maree Wright	Follow Up Clinic Lead	Follow Up Clinic
Tom Clark	Echo and USS, paediatric, audit and research lead.	Ultrasound and research
Ben Ivory	Organ Donation Lead	Simulation and education
Ed Scarth	Clinical Governance	Medical writing & Pharmacology
Adam Revill	Airway and Medical Student Lead	Education

3.6 Details of research projects being undertaken within the unit

We are a research active department. Trainees are expected to help both support and lead projects. We are national experts in rehabilitation care and run quality improvement initiatives to support this. Local trust projects are well supported by our local grants body and there are possibilities to develop your own research portfolio.

We are experts in peri-operative medicine and cardio-pulmonary exercising testing with these fields providing further research opportunities for trainees. Our regional trainee collaborative group (SWARM) was the first anaesthetic group of its type nationally and remains very active. Through this group there is the opportunity to lead on regional intensive care trainee projects.

We are active in recruiting for National ICU studies and co-ordinate these through our multi-professional team to promote the maximal benefit for patients and our trainees.

3.7 How is the unit staffed

We are a progressive and multi-disciplinary team providing truly holistic care for the critically ill patient throughout their journey, from admission to full recovery as an outpatient. This is made possible by a nationally leading rehabilitation and follow-up service in addition to an experienced and multifaceted medical and nursing workforce. Our team includes ICU funded OT, PT, dietician, pharmacy and psychology support staff. Medical trainees are properly supported by the MDT through regular feedback and support.

Our trainees are highly valued for their input into critical care improvement work and complete our team working approach to care for the critically ill.

Senior medical cover 24 hours, 7 days per week is provided by 10 fully accredited full time ICM consultant level doctors on a rota.

Each week, ICM Consultant A does Mon-Weds 8am-6pm, ICM Consultant B does Thurs-Sun 8am-6pm.

Our nursing team is lead 24/7 by senior experienced nurses with the nurse in charge not being allocated to individual patient care to ensure safe oversight and support to the nursing team.

Our critical care outreach service is delivered 24/7 by senior experienced nurses with sessional support from ICM consultants. There is considerable training opportunity available to develop outreach management skills.

5 or 6 Core Trainee junior doctors provide 24/7 trainee cover for the unit on a full shift rota. In addition, hands-on support is provided by the anaesthetic registrars.

Anaesthetic speciality trainees do a minimum of 3 month blocks. Commonly 1 will be on ICU at any one time.

ICM specialty trainee rota:- Negotiated individually according to working hours and training needs.

Part 4 Training

4.1 Details of training opportunities on the unit

Multi-disciplinary Ethos

Our unit takes pride in its multi-disciplinary team working. We hope to instil the importance of this in all our trainees. We work closely with our Outreach Service, Acute Pain Service and Pre-assessment and Rehabilitation Services all of which offer excellent training opportunities for ICM trainees. We have a well-established follow up clinic and are keen to provide experience and training in this area.

Management and leadership

ICM trainees are given support and coaching in team leading, working at a senior level, and clinical management, which again Torbay has a national reputation for excellence in. A working pattern bespoke to the ICM trainee's needs can be designed to allow supervised and supported developmental working at more senior levels with supervisory and leadership roles for other trainees and the wider ICU team as befits the trainee's needs.

Simulation training

Simulation training is delivered on the unit on a regular basis with adult and paediatric scenarios. ICM trainees are encouraged and supported to participate in, and also help facilitate these sessions. The ICU multi-disciplinary team enjoy and benefit from the embedded simulation-training program. This has certainly impacted on the team's expertise to care for the critically ill child.

Ultrasound

The integration of ultrasound into our daily clinical practice is a key departmental objective. A member of the consultant body is accredited in British Society of Echocardiography for Trans-thoracic Echocardiography and is an Intensive Care Society Core Ultrasound in Intensive Care (CUSIC) supervisor and committee member. Trainees can expect to be given ample support to develop their ICU point-of-care ultrasound skill-set and can be tutored through their ICS CUSIC and FICE modules. We have excellent ultrasound facilities with advanced diagnostic-grade machines that are more common-place in the cardiac department. There is the potential opportunity to be involved in echocardiographic research.

Pre-assessment and higher risk patients

Our focus with elective admissions is to select through a bespoke pre-assessment process those at significantly higher risk and care for them initially in a high care setting. We are a nationally recognised centre in this area and our team publish actively in this sub-speciality.

4.2 Details of departmental teaching days

Weekly Journal Club Weds am.
Weekly ICU teaching available for F1/F2/CT
By ITU consultants
Torbay ICM speciality trainee training days run as part of SW school's ICM training for speciality trainees.

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

Monthly M&M and governance review Friday afternoons.
Joint case review meeting for paediatric M&M monthly.

4.4 Number of trainees on each tier of the rota

We have a minimum of 5 full time core trainees covering a 24 hour shift rota. In addition we commonly have 1 anaesthetic specialty trainee doing blocks of ICU training of at least 3 months.