

The Faculty of Intensive Care Medicine

ICM Unit Brief

Part 1 Hospital Details

1.1 Hospital name

Medway NHS Foundation Trust

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

Medway NHS Foundation Trust
Windmill Road
Gillingham
Kent
ME7 5NY

1.3 Hospital Telephone number

01634 830000

Part 2 ICU Department contact details

2.1 Direct telephone number to Department

01634 833967 / 974755 (ICU)
01634 838932 (Critical Care Administrator)

2.2 Faculty Tutor name

Dr Nicky White

2.3 Faculty Tutor Email address

Nichola.white3@nhs.net

Part 3 Unit Structure

3.1 Number of Beds

ICU (9) + HDU (10+5)

3.2 Number of admissions

1800 - 2000

3.3 Percentage of elective vs emergency admissions

ICU: 10:90, HDU: 50:50

3.4 Overview of case mix within the unit

We have a busy 24 bedded critical care department, admitting around 1800 - 2000 patients/year, comprising a separate 9-bedded ICU, 10-bedded amber HDU and 5-bedded green HDU. Being one of the busiest critical care units in the region filled with socio-economic inequalities, the department provides trainees with opportunities to gain experience in a diverse case mix of critically ill medical patients alongside a large number of elective and emergency post-surgical patients. The case mix for the level 3 admissions is approximately 90%-10% emergency: elective split and approximately 70:30 medical: surgical split. The hospital houses many surgical specialities including vascular and ENT and therefore we receive the case mix associated with these. Medical specialities include Cardiology, Respiratory, Neurology, Gastroenterology, Endocrine, Acute Medicine and Elderly Care.

Ventilators (Draeger Infinity V500 and V800) with advanced modes including APRV are in use in the unit. Citrate anticoagulation (Nikkiso Aquarius) is first line for CVVH and we use Edward's Flo Trac for cardiac output monitoring.

There is an active interventional radiology department and we take advantage of this service to deliver unique modalities of therapy (e.g. catheter directed/ ultrasound assisted thrombolysis for intermediate risk pulmonary embolism). The emergency department is the busiest in the region and treats wide ranging acute illnesses. Respiratory medicine department has a comprehensive range of services (TB, lung cancer including interventions like EBUS/ Thoracoscopy, pleural service, busy sleep and domiciliary NIV service) and works in close collaboration with critical care. There is a 24/7 on-call GI bleed rota in place and 24/7 on-call service is also in place for cardiology and major surgical specialties (ENT, colorectal, orthopaedics, vascular, urology).

There is a well-established Post-ICU clinic with physiotherapists and a counsellor embedded within the team.

3.5 Names of Consultants, roles and areas of interest

Name	Role (eg clinical lead, consultant)	Areas of Interest
Dr Paul Hayden	Clinical Lead for Critical Care, Consultant Critical Care and Anaesthesia Trust Organ Donation Lead	USS/ECHO in critical care, sepsis biomarkers, delirium, communication/ rehab, organ donation, QI
Dr Graeme Sanders	Consultant Critical Care and Anaesthesia	Peri-operative optimization
Dr Nandita Divekar	Consultant Critical Care and Anaesthesia	Sepsis, VTE Audit Lead
Dr Arek Makowski	Consultant Critical Care and Anaesthesia	High Flow Oxygen Therapy, vascular anaesthesia, Research and ERAS
Dr Beata Misztal	Consultant Critical Care and Anaesthesia	Patient Blood Management, perioperative anticoagulation
Dr Rahul Sarkar	Consultant Critical Care and Respiratory Medicine	Education, simulation, EBUS bronchoscopy, public health
Dr Ravi Singh-Verma	Consultant Critical Care and Anaesthesia	Peri-operative fluid management, NIV
Dr Rupa Kaur	Consultant Critical Care and Anaesthesia	Management, vascular anaesthesia
Dr Pavol Palcovic	Consultant Critical Care and Anaesthesia	Perioperative medicine, sepsis, haemodynamic monitoring, transfers
Dr Nicky White	ICM Faculty Tutor Consultant in Critical Care and Anaesthesia	Pre-hospital medicine, trauma, Education, welfare
Dr Rachel Krol	Consultant Critical Care and Anaesthesia	Outreach, critical care rehabilitation
Dr Nikhil Bhatia	Consultant in Critical Care and Acute Medicine	Ambulatory care
Dr Sarah Hare	Clinical Director Perioperative and Critical Care Consultant Anaesthetist	Management, paediatrics, emergencies
Dr Vipal Chawla	Locum Consultant in Critical Care	USS, vascular access, education
Dr Gihan Hettiararchchi	Respiratory Medicine	TB, Pulmonary embolism
Dr Ashok Chengappa	Respiratory Medicine	Lung cancer
Dr Sandip Banerjee	Respiratory Medicine	Sleep disordered breathing, NIV
Dr Lisa Vincent-Smith	Respiratory Medicine	Sleep disordered breathing, NIV
Dr Kate Brignall	Respiratory Medicine	NIV, ILD
Dr Tom Sanctuary	Respiratory Medicine	
Dr Ahmed Haque	Respiratory Medicine	

3.6 Details of research projects being undertaken within the unit

Medway is involved in a large number of local and national research projects. We are currently recruiting in BLING and other trials. Previously completed studies include "65 Trial", PRISM, Ingenza and TEST-IT, LEOPARDS, ACCUPASS, CALORIES, PROMISE, FREE, IOSWear, ISOS, EPOCH, TRAC-MAN, OSCAR, FIRE, ECLIPSE, CIRCA and ETHICUS among others. Trainees are encouraged to complete their GCP and participate in the research activities.

3.7 How is the unit staffed?

Junior medical cover is made up of a combination of ICM, Medical, Anaesthetic, ACCS and Foundation trainees as well as Clinical Trust Fellows (CTFs) and Specialty Doctors. Our fantastic Advanced Critical Care Practitioners (ACCPs) also participate in the rota.

The morning and evening handover is of all the units. The medical team is then divided up to cover the 3 clinical areas (ICU, Amber HDU, Green HDU). Everyone rotates around to gain maximum clinical experience as ICU and HDU have different learning opportunities.

Out of hours work is in teams of 3, usually with one Registrar/Middle Grade doctor.

F1 doctors are part of the team as supernumerary members, working Monday to Friday daytime.

Senior cover is provided by the consultants on-site (0800-1800) seven days a week and distally out-of-hours, with readiness to be on-site whenever needed.

4.1 Details of training opportunities on the unit

- There is weekly teaching, including regular journal club. This is supervised by consultants and all doctors and ACCPs have the opportunity to present.
- ICU BASIC course is delivered yearly through the department.
- There are dedicated Ultrasound scanners available in each of the critical care areas for use in clinical services and training.
- Opportunities to perform regularly performed ICM procedures including percutaneous tracheostomy.
- It is possible to be involved in regular research activities within the department.
- There are opportunities for being involved in hospital wide “Medilead” project.
- There is scope to gain exposure in domiciliary NIV services due to close association between ICM and respiratory medicine department.
- There are opportunities to learn bronchoscopy with single patient use bronchoscopes available within the unit
- There can be opportunities to be involved in regular teaching for medical students.
- There can be opportunities to gain exposure to post ICU follow up clinic.
- Trainees regularly get involved in regular multidisciplinary teaching including simulation based teaching.

4.2 Details of departmental teaching

Days:

Weekly Wednesday ICU tutorials (2 hours)
Journal club - Wednesdays
ICU simulation

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

Monthly directorate audit meeting
Quarterly multi-disciplinary audit meetings
Monthly M&M meetings
Monthly programme board meetings

4.4 Number of trainees on each tier of the rota

There are currently 26 Junior Doctors and ACCPs on the rota. The rota is a 1:6. We are in the process of recruiting, in order to aim for a 1:7/8 rota.

All day shifts are currently long days as the majority of referrals are made between 4pm and 8pm.

There are a minimum of 3 juniors on 24/7, covering the three Critical Care areas (ICU, Amber HDU, Green HDU). One of those is usually of Registrar/Middle Grade level.

Airway support is provided by the Anaesthetic on-call team (2 Regs, 1 SHO)

Depending on the previous experience of an individual trainee, time is provided in the rota for acclimatisation to critical care before any out-of-hours work.