

The Faculty of Intensive Care Medicine

ICM Unit Brief

Part 1 Hospital Details

1.1 Hospital name

Glasgow Royal Infirmary

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

84 Castle Street
Glasgow
G4 0SF

1.3 Hospital Telephone number

0141 211 4000

Part 2 ICU Department contact details

2.1 Direct telephone number to Department

0141 201 5430

2.2 Faculty Tutor name

Dr Richard Cowan

2.3 Faculty Tutor Email address

richard.cowan@ggc.scot.nhs.uk

Part 3 Unit Structure

3.1 Number of Beds

20: 16 level 3. 4 level 2

3.2 Number of admissions

Approx. 1000 per year

3.3 Percentage of elective vs emergency admissions

Approximately 15% elective admissions – these are mostly level 2 post-operative patients

3.4 Overview of case mix within the unit

Admits general surgical (upper GI, colorectal, pancreatic), general medical, urology, gynaecological, orthopaedics, and plastic surgical patients. Tertiary referral centre for complex pancreatitis and Scottish national burns centre for adults. No paediatric beds. Busy maternity hospital onsite with abnormally invasive placenta service. Interventional radiology and bariatric services. Intestinal failure, complex sarcoma and robotic surgery services in the hospital. Busy medical department with several specialties. Located in area with high levels of comorbidity and deprivation with subsequent complex health needs in local population. Trauma Unit in Scottish trauma network.

3.5 Names of Consultants, roles and areas of interest

Name	Role (eg clinical lead, consultant)	Areas of interest
Dr Audrey Chalmers	Consultant Wellbeing lead	Sedation, Christian Medical Foundation
Dr Fiona Christie	Consultant QI lead	Medical law and ethics Quality Improvement Post ICU care/InS:PIRE
Dr Richard Cowan	Consultant Faculty Tutor	FUSIC mentor (Heart, lung, Abdo, Vascular, HD) Post ICU care/InS:PIRE
Dr Jennifer Cuthill	Consultant Governance Lead	Exercise physiology, Advanced Life Support
Dr Malcolm Daniel	Consultant Health Foundation Quality Improvement Fellow,	Quality Improvement Evidence based medicine Post ICU care/InS:PIRE
Dr Kyle Dick	Consultant Rota Co-ordinator	Training and trainee wellbeing
Dr Lindsay Donaldson	Consultant Director of Medical Education	Acute and chronic liver disease in ICU. Medical education, Civility in medicine
Dr Joe Hawkins	Consultant SICSAG lead Major Incident Lead	Ethics in intensive care medicine. Organ donation
Dr Martin Hughes	Consultant Difficult ventilation Lead	Ventilation, Echocardiography, Clinical reasoning, diagnostic error and decision making, coma
Dr Claire McCue	Consultant Transfer training Lead	Obstetric Critical Care HAI & antimicrobial stewardship FUSIC(Heart) mentor
Dr Chris McGovern	Consultant FY1 lead	Burns research
Dr Barbara Miles	Clinical Director for ICM Consultant Tracheostomy Lead Mobilisation Lead	Mobilisation, airway Team training, Percutaneous tracheostomy FUSIC (lung) mentor
Dr Alex Puxty	Consultant Sepsis Lead	Echocardiography, Sepsis, Fluid optimisation, research, e-health FUSIC(Heart) mentor
Prof. Tara Quasim	Consultant Audit and Research Lead InS:PIRE Project Lead	Research, Sedation, ICU follow up/InS:PIRE clinic, Professor of Anaesthesia, Critical Care and Perioperative Medicine, FRCA Examiner
Dr Kathryn Puxty	Consultant Organ Donation Research Lead CSO Research fellow	Echocardiography, FUSIC lead and mentor for most modules Research – outcome of patients with malignancy in ICU, Big Data

		in ICU
Dr Lia Paton	Consultant ACCP training lead Burns Lead Sim Training lead	ACCP training Burns Percutaneous tracheostomy In situ simulation

3.6 Details of research projects being undertaken within the unit

- InS:PIRE – post-intensive care rehabilitation clinic with several associated research streams/projects
- Recruitment for several RCTs/cohort studies including REMAP-CAP, RECOVERY, MARCH PHIND and GenOMICC with support from clinical research facility/research nurses
- ICU Biobank project
- Academic consultants with dedicated CSO research fellowship funding/time
- Research team and Prof. Quasim (University of Glasgow Professor of Anaesthesia, Critical Care and Perioperative Medicine) supervise several students/research fellows with ongoing projects that interested trainees can potentially get involved with

Wide-ranging quality improvement programme with several embedded ongoing projects.

3.7 How is the unit staffed

- 15 full-time consultants. 2 consultants in unit between 0800-2100 with 1 consultant on call overnight. 2 consultants on call during the day at the weekend, reducing to 1 consultant on call from 1700. A third consultant present Monday – Friday 0800-1300.
- One FY1 working 5 12 hour shifts on then having 5 days off.
- 10 trainees on the rota at a time. Two trainees on call together at all times doing 13 hour shifts in both the HDU and ICU side of the unit. Trainees come from ACCS, anaesthetic and acute medical backgrounds from CT1 – ST7 grades.
- Additionally we usually have 1-2 senior/advanced ICU trainees who take part in the consultant on call rota but always with a first on call consultant immediately available if required.
- 4.5 ACCPs providing mostly day time cover – planned expansion.

Part 4 Training

4.1 Details of training opportunities on the unit

- Several FUSIC(Heart) mentors and mentors for other FUSIC modules.
- Weekly grand round, structured CPD tutorials and online archive of previous tutorials.
- Weekly morbidity and mortality with monthly in depth reviews if required.
- Percutaneous tracheostomy insertion training.
- Tertiary referral centre for burns and complicated pancreatitis patients.
- Affiliated with Glasgow University providing research opportunities.
- Regular use of Intermittent Haemodialysis as our mode of renal replacement therapy.
- Exposure to complex intestinal failure and sarcoma patients and their management
- Training centre for ACCP trainees.

4.2 Details of departmental teaching days

- Grand Round every Tuesday afternoon incorporating QI, pt. review, CPD tutorial/journal club and M&M.
- Participation in regional teaching programme
- Online ICM teaching tutorials wed afternoons
- Anaesthetic department teaching tutorials also available for those who are interested

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

- Grand Round every Tuesday afternoon where current patients are discussed along with discussion of all deaths in previous week.
- Dedicated 3 monthly governance meeting and regular governance newsletter
- Senior trainees are encouraged to attend business meetings and all trainees to present at grand round and journal club.
- Quarterly MDT M&M with other specialties for in depth review and to high light cross-specialty learning points

4.4 Number of trainees on each tier of the rota

- 10 trainees on main tier of rota – 2 work at a time doing 13 hour shifts. There can be a broad range of experience but at least one of the two will have airway experience (Initial assessment of competency in anaesthesia).
- FY1 doctors on their own rota mostly covering day shifts.
- Usually but on occasion two advanced trainees at a time who take part in the consultant rota but in a supernumerary fashion so there is always a consultant on call with them.