

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 boasting 4 full isolation rooms and views over the Devon countryside! We are a mixed medical and surgical DGH general ICU. We currently provide six Level 3 and four Level 2 patient equivalents with physical capacity to increase this to provide for 14 level 2/3 patients. We also manage 2 level 1.5 "Higher Care" beds for high-risk orthopaedic admissions in a separate dedicated unit and support the management of up to 2 level 1.5 general surgical cases within main theatres recovery/PACU.

We serve a diverse population in Torbay, including a large transient group of holidaymakers 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. We also admit a number of critically ill children to provide immediate resuscitation and stabilisation prior to transfer to Bristol Children's Hospital PICU.

3.5 Names of Consultants, roles and areas of interest

Name	Role	Additional roles and interests
Adam Revill	Clinical service lead, Audit and research Lead, Consultant	Education, Research
Tod Guest	Governance lead Consultant	Simulation, Human Factors
Richard Eve	Outreach lead Consultant	LNC Chair, Deteriorating patient group lead for ICU, EPR systems, Training
John Carlisle	Consultant	Peri-operative medicine CPX, Pre-op assessment, statistics
Jonathan Ingham	Consultant	Training, Echo, Airway
Ben Ivory	Infection Control lead Consultant	National clinical education lead for organ donation, Simulation and education
Ed Scarth	Consultant	Medical writing & Pharmacology
Nikki Freeman	Clinic and organ donation lead, Consultant	Follow-up and Rehab lead, Maternal critical care
Adam Carpenter	Faculty tutor, Transfer lead, Consultant	Education, simulation, Duty consultant with Retrieve Adult Critical Care Transfer service.
Ben Whittaker	Clinical information systems lead, Consultant	EPR, Education, FUSIC
Kate Smurthwaite	Paediatric Lead, Consultant	Medical Student lead, Education
Rachel Saunders	Consultant	Infectious Diseases, Antimicrobials, Education, Duty consultant with Retrieve Adult Critical Care Transfer Service.

3.6 Details of research projects being undertaken within the unit

We are a research active department and trust. We are funded for dedicated consultant time to support research in anaesthesia and critical care. Our anaesthetic and critical care departments are supported by a specific team of dedicated research nurses and there are abundant opportunities to join the team and develop transferable skills such as leadership, team working and management. This lends itself very well to now offering a Stage 2 Special Skills Module/ Anaesthesia stage 3 SIA in Academic Research.

All trainees are expected to help support projects, present at our weekly ICU journal club, and if interested, take a lead role. 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. We are currently recruiting to:

UK-ROX
MOSSIAAC
ABC Post ICU
REMAP-CAP
MARCH
Genomicc
ERASER

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.

3.7 How is the unit staffed

We are a progressive and multi-disciplinary team providing truly holistic care for the critically ill patient. 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. Our trainees are highly valued for their input 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 12 fully accredited full time ICM consultant level doctors. Each week: ICM Consultant A does Mon-Weds 8am-6pm then Sat 24hr on call (plus critical care outreach cover Friday pm). ICM Consultant B does Thurs 8am-6pm, Fri and Sun 24hr on call. Over recent years we have also been delighted to support Stage 3 ICM Advanced trainees working directly alongside the consultant team.

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 afternoon sessional support from ICM consultants. The outreach consultant then covers the ICU on call overnight.

Core Trainee junior doctors provide 24/7 trainee cover for the unit on a full shift rota, usually on a 1 in 6 basis. These are a mix of ACCS, core anaesthetics and IMT doctors. In addition, hands-on technical support is provided by the anaesthetic registrars on duty for the hospital.

Specialty trainees

For practical reasons we do not operate a separate ICM registrar/speciality trainee rota. However, we routinely accommodate stage 1 ICM trainees and anaesthetic registrars to work alongside our core trainees, with an expectation of increased responsibility and less direct supervision.

Foundation Doctors

The unit is also supported during week days by 3 Foundation doctors (2 F1s, 1 F2).

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.

ICU Rehabilitation and Follow-up Clinic

We are national experts in rehabilitation care and run quality improvement initiatives to support this. 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 Stage 3 ICM trainee's needs can be designed to allow supervised and supported developmental working at more senior levels.

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 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. We also have a close working relationship with our medical education simulation team at the Horizon centre, with active involvement in simulation training for foundation doctors and medical students.

Ultrasound

The integration of ultrasound into our daily clinical practice is a key departmental objective. We have excellent ultrasound facilities with an advanced diagnostic-grade machine. Whilst as a consultant body we are currently unable to offer FUSIC mentoring, we have a close working relationship with our local echo technicians who have agreed to act as FUSIC mentors for the department. We are looking to actively expand our own use of cardiac echo and lung ultrasound and are keen to support trainee interests in this area.

Pre-assessment and higher risk patients

We are experts in peri-operative medicine and cardio-pulmonary exercising testing with these fields providing further research opportunities for trainees. 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 Weds Lunchtime Journal Club
- Dedicated, rolling ICU education programme – induction day plus 5 half study days/6 months, aimed at introducing core trainees to key ICM topics.
- Torbay ICM training days run as part of SW school's Regional ICM training (twice a year).
- Annual simulation based intra- and inter-hospital transfer training day in conjunction with Retrieve Adult Critical Care Transfer service.

4.3 Clinical governance meetings and/or M&M

- Monthly ICM M&M and governance reviews.
- Joint case review meeting for paediatric M&M bi-monthly in conjunction with Bristol Children's hospital and local paediatric transfer service WATCH + annual 'roadshow'.
- Opportunity for specific case/team debriefing facilitated by our clinical psychologist.

4.4 Number of trainees on each tier of the rota

We have a minimum of 6 full time core/specialist trainees covering a 24-hour shift rota, supported on weekdays by 3 foundation doctors.
In addition, we regularly accommodate stage 3 ICM Advanced trainees and are in the process of setting up special study modules for stage 2 ICM trainees.