Critical Care Occupancy: Briefing Sheet for charge nurses

The 2nd Sprint National Anaesthesia Project (SNAP-2): Epidemiology of Critical Care provision after Surgery (EpiCCS)

We would like your help in collecting data for this research study which will look at how critical care resources are allocated for surgical patients. Both patients and clinicians are being given questionnaires to fill in. Most hospitals across the UK, as well as your hospital, are taking part. For this study, we need your help as the nurse in charge for one of the intensive care or high dependency units in your hospital. Please take time to read the following information carefully. If there is anything that is not clear or if you would like more information, please contact your Local Lead Investigator (details can be found at the bottom of this page).

What is the purpose of the study?

It has been suggested that patients who are at high risk of complications should be admitted to critical care after surgery. Critical Care would normally only be considered for people who are having either very major surgery, or who have a number of significant background illnesses. Previous research studies have shown that there is variation in which patients are cared for in Critical Care in different institutions and countries. Even in the UK, we know that there is variation between institutions, in the type of patient who receive postoperative critical care. We are conducting this study to try and uncover some of the reasons for these findings. We also hope to find out whether Critical Care after surgery shows a beneficial effect in patient recovery after surgery.

Why am I being approached for information?

Part of our study relies on having accurate information about the bed occupancy in the Critical Care areas within the hospital where patients may be admitted to after their surgery. We hope that you would be able to help us gather the required information about your unit.

What will I have to do?

We will ask you to complete the short questionnaire on page 2. It involves recording information at 8am and 8pm this week, about how many beds are occupied and available on your unit. Filling in the questionnaires should be straightforward and does not take up much time.

What will happen to the answers provided in the questionnaires?

The Local Lead Investigator will transfer the answers from the paper questionnaires onto a computer database. The anonymised responses from hospitals across the UK will be analysed by a team of researchers based at University College Hospital in London. The information will be kept securely for 10 years in order for long-term outcomes to be accurately studied. As the information will be anonymised, you will not be able to be identified from it. The results from the study will be published on the SNAP-2 website. We also intend to produce both oral and written reports of the results.

Further information and contact details

Website: http://www.niaa.org.uk/SNAPs   Study email address: snap2@rcoa.ac.uk

Local Principal Investigator name and contact details:

Critical Care Occupancy

We are surveying the critical care bed occupancy levels at your hospital during the week of SNAP-2. Please could you complete the following information for each day that the study is running at 08:00 hrs and 20:00 hrs.

Please then return this form at the end of the study recruitment week to the Local Lead Investigator for SNAP-2, who will then submit the data to an online database. The study recruitment runs for 1 week, starting on a Tuesday and finishing on the following Monday.

Tuesday

1.1. Date (DD/MM/YYY): ___/___/_____

1.2. Number of booked elective surgical patients today for which a Critical Care bed has been requested: _____

	1.3. Number of physically empty and staffed beds available in the next hour	1.4. Number of patients ready for discharge should a ward bed become available in the next hour	1.5. Number of patients currently being actively treated and not available for discharge
08:00 hrs			
20:00 hrs			

Wednesday

1.1. Date (DD/MM/YYY): ___/___/_____

1.2. Number of booked elective surgical patients today for which a Critical Care bed has been requested: _____

	1.3. Number of physically empty and staffed beds available in the next hour	1.4. Number of patients ready for discharge should a ward bed become available in the next hour	1.5. Number of patients currently being actively treated and not available for discharge
08:00 hrs			
20:00 hrs			

Commented [A1]: These can be beds booked on the morning of surgery or in advance (one day or more before).

Commented [A2]: We know several sites have mixed ICU/HDUs with the ability to flex beds up or down between Levels 1-3 depending on what type patient needs a bed. For this question, please answer in this way:

We want to record the number of physically beds AND staffing for these beds. We want the limiting factor when it comes down to capacity.

Therefore:
-If you have 2 physical beds but 1 nurse, the answer should be 1.
-If you have 2 physical beds and 2 nurses to staff them, the answer should be 2.
-If you have extra nurses for the day, but only 1 physically empty bed, then the answer should again be 1.

Commented [A4]: These are patients still requiring full Critical Care support and not ready or fit enough to be discharged to ward level care.

Commented [A3]: These should be patients physically fit enough to be discharged from Critical Care, and are just awaiting an empty bed on the ward to go into.

Thursday

1.1. Date (DD/MM/YYY): ___/___/_____

1.2. Number of booked elective surgical patients today for which a Critical Care bed has been requested: _____

	1.3. Number of physically empty and staffed beds available in the next hour	1.4. Number of patients ready for discharge should a ward bed become available in the next hour	1.5. Number of patients currently being actively treated and not available for discharge
08:00 hrs			
20:00 hrs			

Friday

1.1. Date (DD/MM/YYY): ___/___/_____

1.2. Number of booked elective surgical patients today for which a Critical Care bed has been requested: _____

	1.3. Number of physically empty and staffed beds available in the next hour	1.4. Number of patients ready for discharge should a ward bed become available in the next hour	1.5. Number of patients currently being actively treated and not available for discharge
08:00 hrs			
20:00 hrs			

Saturday

1.1. Date (DD/MM/YYY): ___/___/_____

1.2. Number of booked elective surgical patients today for which a Critical Care bed has been requested: _____

	1.3. Number of physically empty and staffed beds available in the next hour	1.4. Number of patients ready for discharge should a ward bed become available in the next hour	1.5. Number of patients currently being actively treated and not available for discharge
08:00 hrs			
20:00 hrs			

Sunday

1.1. Date (DD/MM/YYY): ___/___/_____

1.2. Number of booked elective surgical patients today for which a Critical Care bed has been requested: _____

	1.3. Number of physically empty and staffed beds available in the next hour	1.4. Number of patients ready for discharge should a ward bed become available in the next hour	1.5. Number of patients currently being actively treated and not available for discharge
08:00 hrs			
20:00 hrs			

Monday

1.1. Date (DD/MM/YYY): ___/___/_____

1.2. Number of booked elective surgical patients today for which a Critical Care bed has been requested: _____

	1.3. Number of physically empty and staffed beds available in the next hour	1.4. Number of patients ready for discharge should a ward bed become available in the next hour	1.5. Number of patients currently being actively treated and not available for discharge
08:00 hrs			
20:00 hrs			