

General Provision of Intensive Care Services 2015

Gary Masterson¹ and Simon Baudouin²

Journal of the Intensive Care Society 2015, Vol. 16(1) 9-10 © The Intensive Care Society 2015 Reprints and permissions: sagepub.co.uk/ journalsPermissions.nav DOI: 10.1177/1751143714557617 jics.sagepub.com



General Provision of Intensive Care Services (GPICS) 2015 builds on Critical Care Core Standards 2013 and is the first step towards the development of a definitive reference source for the planning and delivery of UK Intensive Care Services (ICS). The need for GPICS is the result of the transformation of critical care into a standalone speciality in the UK. Amongst the many important milestones that underpin this evolution have been the establishment of the ICS in 1970, the formation of the Fellowship in Critical Care Medicine (FICM) in 2010 and the approval by the General Medical Council of the Intensive Care Medicine (ICM) CCT in 2012.

GPICS will be of particular relevance to clinicians involved in the management and design of critical care services; hospital managers; commissioners; Adult Critical Care Operational Delivery Networks; and the NHSE Adult Critical Care Clinical Reference Group. However, GPICS also includes a number of major clinical topics and will, therefore, also be of interest to those who undertake clinical audit to improve their practice and for revalidation. Currently, the FICM and ICS are co-developing an Audit Recipe Book of recommended audits and future editions of GPICS will link chapters to audit recommendations.

The publication of the first edition of GPICS is the start of a journey to build a comprehensive index of evidence-based recommendations and standards for UK ICM. GPICS will be updated and will grow with the addition of new chapters. The recommendations in GPICS are, where possible, based on strong evidence. However, we acknowledge that in a number of areas, particularly those dealing with service configuration, the evidence base is incomplete. The Faculty and Society, as a joint initiative, are addressing this 'evidence gap' by developing a portfolio of evidence-based guidelines. With time, it is the intention of our organisations to obtain NICE guideline development accreditation to strengthen the authority of our recommendations.

GPICS is divided into six chapters which contain a variable number of sections and subsections. Chapter One is an introduction which describes the service. Chapter Two describes in detail the structure of the service including physical facilities and staffing. Chapter Three details the process of the service and

focuses on the patient's pathway. Chapter Four describes the activity of the critical care service including aspects of disease management and prevention, as well as specialised critical care. Chapter Five contains other additional key components of the service ranging from operational delivery networks to resilience planning. Finally, Chapter Six is a duplication of Core Standards 2013.

GPICS has been designed so that its constituent chapters and sections are clear, concise and readable. The sections have been written by recognised UK experts in their respective fields and each will have a standard format of an Introduction, Recommendations, Standards, Background, References and Relevant On-going Research (where appropriate). Some chapters will also have an Additional Information section.

Recommendations will be statements that the authors feel *should* be good practice in UK ICM and which are endorsed by the both FICM and ICS. Stakeholder consultation is also important and we have consulted with all major UK organisations linked to critical care. GPICS has also undergone public consultation. In time and where appropriate some Recommendations will evolve into Standards depending on both available clinical evidence and the consensus opinion of the FICM/ICS Joint Professional Standards Committee. We, therefore, suggest that units develop clear strategies for achieving these recommendations within the short to medium term.

Standards quoted by authors in GPICS are already included in the Core Standards 2013 document. These *must* be followed by UK Intensive Care Units and are the major resource for the adult critical care clinical reference group to make commissioning priorities. Both GPICS Recommendations and Standards will be key to peer review processes by Operational

Corresponding author:

Gary Masterson, Chair of ICS Safety, Standards and Quality Committee & Co-Chair of FICM/ICS Joint Professional Standards Committee, UK. Email: Gary.Masterson@rlbuht.nhs.uk

¹Chair of ICS Safety, Standards and Quality Committee & Co-Chair of FICM/ICS Joint Professional Standards Committee, UK

²Chair of FICM Professional Standards Committee & Co-Chair of FICM/ICS Joint Professional Standards Committee, UK

Delivery Networks on behalf of commissioners and the Care Quality Commission.

Although all of the Standards from Core Standards 2013 appear throughout GPICS, it is retained as a standalone document as the final chapter of GPICS. This will provide a rapid reference source for Standards when required.

GPICS will be published in early 2015, and we hope it will meet the expectations of the intensive care community and our patients.