



# SNAP-2: EpiCCS

Sprint National Anaesthesia Project 2: Epidemiology of Critical Care Provision after Surgery

Dear Colleague,

Thank you for agreeing to complete this survey that we are conducting to get a better understanding of how inpatients receive Critical Care.

To proceed to the survey (online) please click this link: <https://www.tfaforms.com/441308>

## Background to the Organisational Survey

Although it may be clear to most clinicians what constitutes an Intensive Care bed, and what constitutes a General Ward bed, there is a wide spectrum in between these extremes where patients may potentially receive Critical Care. While guidelines exist to define minimum standards for Intensive Care, we understand that there are other patient care areas within the hospital equipped to care for patients who require one or more interventions associated with Critical Care. Some clinicians within the Anaesthetic and Intensive Care community have termed these “Level 1.5 beds”, and readers may readily recognise them within their own hospitals.

For the purposes of accurately describing the epidemiology of Critical Care in SNAP-2, we would like to find out more about such locations within your hospitals where high-risk patients may be admitted to for Critical Care under normal day-to-day circumstances.

We would like to emphasise that, other than for one question on Page 3 asking about the number of beds in your hospital, we are not including paediatric services for this survey. In addition, for NHS trusts that operate on more than one hospital site, please provide responses for individual hospitals. You will be given an opportunity to save your progress and return to the survey at a later date if you choose not to complete it all at once. If you have any queries, feel free to contact us by email: [dwong@rcoa.ac.uk](mailto:dwong@rcoa.ac.uk).

Thank you once again for taking the time to participate!

Yours sincerely,

Danny Wong,  
SNAP-2 Trainee Lead on behalf of the SNAP-2 Project Team

Ramani Moonesinghe,  
Director of the National Institute of Academic Anaesthesia's Health Services Research Centre

## Site Information

- What is the name of the NHS Trust you are reporting on? \_\_\_\_\_
- What is the name of the Hospital you are reporting on? \_\_\_\_\_
- Name of person completing survey (*for listing as a collaborator for future manuscripts*):  
\_\_\_\_\_
- E-mail address of person completing survey (*for clarification of responses*):  
\_\_\_\_\_
- Position of person completing survey: \_\_\_\_\_

## Critical Care Unit Services:

- 1) What is the total number of hospital beds in this hospital? (*Please give best approximation if unsure*) \_\_\_\_\_
- 2) Does this hospital have an ICU? (Y/N)
- 3) Does this hospital have a HDU? (Y/N)
- 4) Does this hospital have an Emergency Department? (Y/N)
- 5) Please list the names of the ICU/HDU wards and complete the table below:

Unit name	Total number of funded Critical Care beds	Maximum number of beds for ventilated patients	Is this an ICU, HDU or Mixed?	Type of unit (General/Mixed, Medical, Surgical, Neuro, Cardio, Liver, etc.)	If a specialist unit does it accept admissions from a different specialty? (e.g. Non-neuro patient on a Neuro-ICU)
Example Unit	10	10	Mixed	General	N

Please use the free-text area below to give any further details about these units in order to help us understand it better. (*e.g. HDU run by nephrologists, exclusively surgical HDU, etc*)

e.g. Example Unit: Run by Consultant Intensivists with 100% sessions in ICU.

- 6) Is this hospital a tertiary specialist centre for:
- a) Bariatric surgery? (Y/N)
  - b) Bone marrow transplants? (Y/N)
  - c) Burns care? (Y/N)
  - d) Cardiothoracic surgery? (Y/N)
  - e) Complex colorectal services, including intestinal failure? (Y/N)
  - f) Complex interventional cardiology? (Y/N)
  - g) Extracorporeal membrane oxygenation (ECMO)? (Y/N)
  - h) Hepatobiliary & pancreatic surgery? (Y/N)
  - i) Hyper-acute stroke services? (Y/N)
  - j) Major trauma? (Y/N)
  - k) Maxillofacial surgery? (Y/N)
  - l) Neurosurgery? (Y/N)
  - m) Solid organ transplants? (Y/N)
  - n) Upper GI surgery (Y/N)
  - o) Vascular surgery? (Y/N)
  - p) Other (please elaborate): \_\_\_\_\_

## Other beds for high-risk patients

- 1) Does your theatre complex have a recovery area that **routinely** accepts ventilated patients for **planned** overnight recovery? (*This can include any Post-Anaesthetic Care Units (PACUs), Overnight Intensive Recovery (OIR), Obstetric HDUs or other wards with "monitored beds".*) (Y/N)
- 2) Other than the ICUs/HDUs listed on the previous page, are there any other ward areas in the hospital which receive high-risk surgical patients for enhanced perioperative care? (Y/N)
- 3) If yes to 2), how many additional separate areas are there which provide such care?  
\_\_\_\_\_
- 4) Please list the names of these ward areas and complete the tables below:

Ward Area name	Max. No. of Beds	How many patients does one nurse typically look after?	What type of Consultant is clinically responsible for this unit/area? (Perioperative Anaesthetist, Surgeon, Intensivist, Other [please elaborate])
Example Unit	2	2	N

Able manage the following therapy? (Y/N)

Ward Area name	Continuous monitoring	Invasive BP	Vasoactive infusions	Intubated patients	CPAP/ NIV	Epidural analgesia	Other therapy (please elaborate)
Example Unit	Y	Y	Y	N	Y	Y	Nil

Please use the free-text area below to give any further details about this unit in order to help us understand it better. (*e.g. Cardiothoracic patients only, exclusively for Upper GI surgery, etc*)

e.g. Example Unit: HDU for surgical patients with daily Consultant WR by surgeon.

## General ward beds for surgical patients

- 1) How many general ward beds are designated for surgical patients in this hospital?  
*(Please give best approximation if unsure, by surgical we include all procedures taking place in an operating theatre or radiology suite for which inpatient [overnight] stay is planned, including both planned and emergency/urgent surgery. Please count beds for all surgical subspecialties, including neurosurgery, cardiothoracic surgery, gynaecological surgery. But please exclude obstetric beds, there will be opportunity to account for obstetric beds later in the survey.)* \_\_\_\_\_
- 2) How many surgical wards are there in this hospital? *(Please give best approximation if unsure, exclude obstetric wards, i.e. pre-natal, post-natal, and labour wards.)* \_\_\_\_\_
- 3) How many beds would there be in an "average" surgical ward at your hospital? *(Please give best approximation. Your hospital may have multiple surgical subspecialties. By "average" we mean an archetypical/stereotypical surgical ward, that may manage the most common inpatient surgical procedures at your hospital.)* \_\_\_\_\_
- 4) What is the typical number of **nurses** available on the "average" surgical ward per **day-time** shift? *(We would suggest asking the nurse-in-charge of the surgical ward you think fits the "average" description how many nurses she has staffed on the day you are completing the survey, for example.)* \_\_\_\_\_
- 5) What is the typical number of **nurses** available on the "average" surgical ward per **night-time** shift? \_\_\_\_\_
- 6) What is the typical number of **Health-Care Assistants** available on the "average" surgical ward per **day-time** shift? *(We would suggest asking the nurse-in-charge of the surgical ward you think fits the "average" description how many nurses she has staffed on the day you are completing the survey, for example.)* \_\_\_\_\_
- 7) What is the typical number of **Health-Care Assistants** available on the "average" surgical ward per **night-time** shift? \_\_\_\_\_

## Policies and Pathways

- 1) Does this hospital have a specific policies or pathways for particular patient subgroups?  
*(e.g. an Enhanced Recovery pathway for colorectal surgery, or postoperative critical care admission policy for Cardiothoracic surgery patients) (Y/N)*
  - a) If yes, which surgical patient subgroups have applicable policies?

## Conclusion

- 1) We welcome any other free-text comments you might have concerning the topic of this survey *(Free text response)*:

Thank you for taking the time to complete the survey. Please do upload your responses to the online survey tool: <https://www.tfaforms.com/441308>. Alternatively, you can forward your responses by email to: [snap2@rcoa.ac.uk](mailto:snap2@rcoa.ac.uk)