

Changes in Intensive Care over the past 10 years.

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Aim

- To describe the changes in the resources and activity in ICUs over 10 years.
- To set the scene for the presentations on mega units later today.

How

- ANZICS Research Centre for Critical Care Resources (ARCCCR)
- Started in 1991
- Annual survey of unit resources and activity
- Became Critical Care Resources (CCR) registry
- Funded by Governments as part of CORE

This study

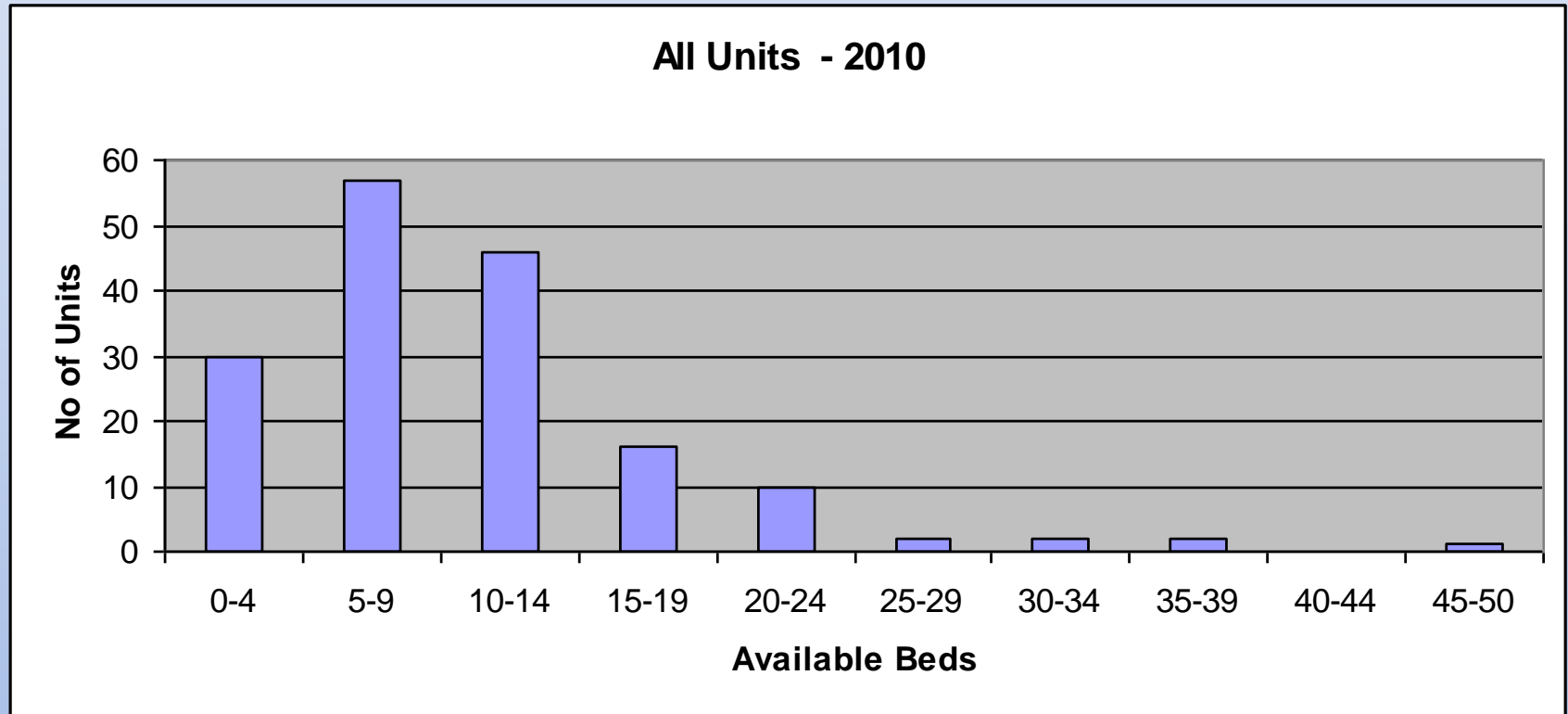
- 10 year review of changes. 2001-2008/10
- Partially skipped 2004 (catch up) and 2009 (due to H1N1)
- Selected 36 Tertiary units for analysis
 - Only included Units with complete data series
 - Varies with each data element
 - Report as a % of 2000/2001 data

Totals used rather than medians

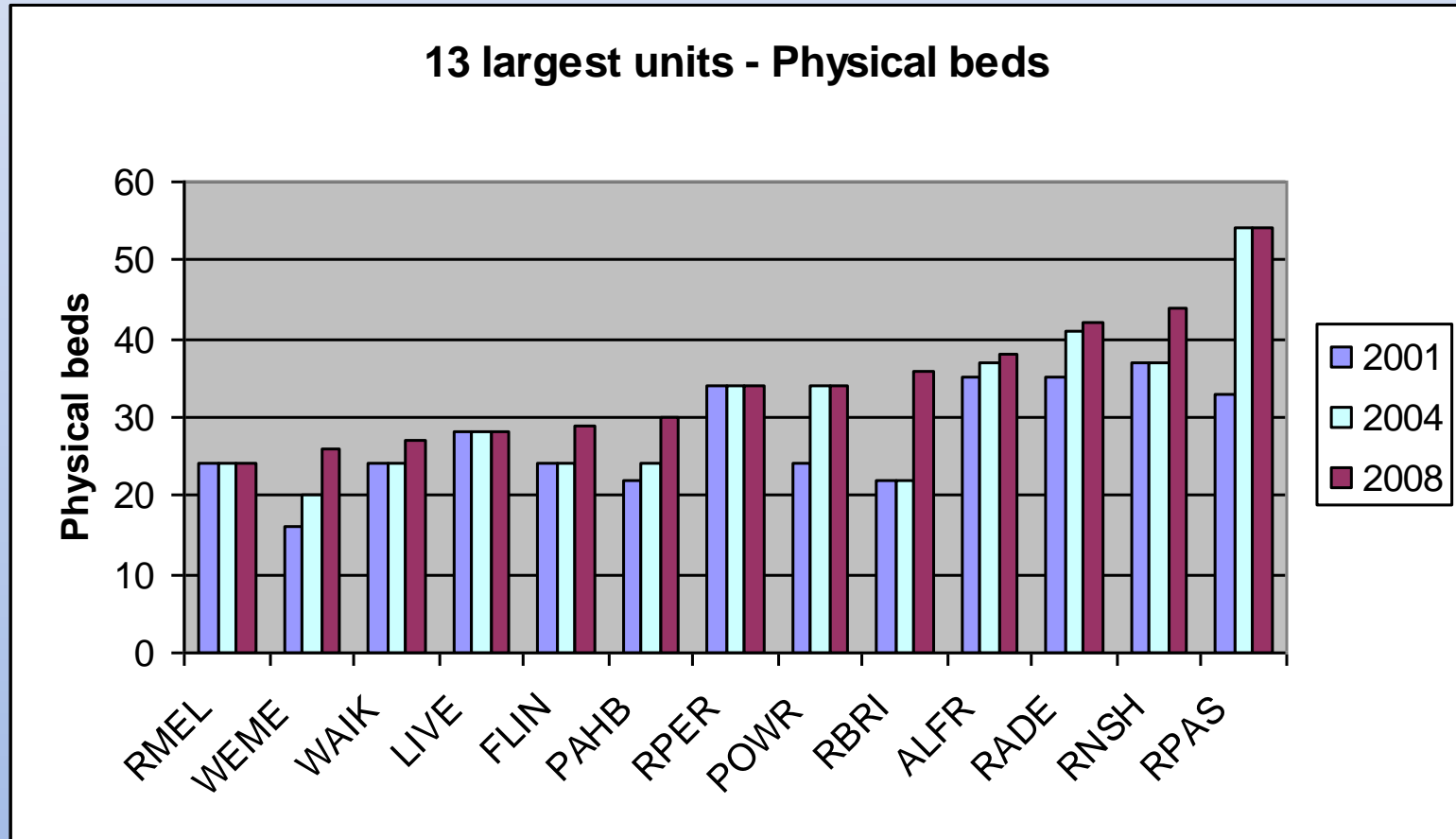
Data elements

- Physical beds -
- Available beds - physical and staffed
- Total admissions (ICU/HDU/Other)
- Bed days
- Senior medical - full time equivalent (FTE)
- Nursing – full time equivalent (FTE)
- Declined admissions (elective and acute)
- Late discharges

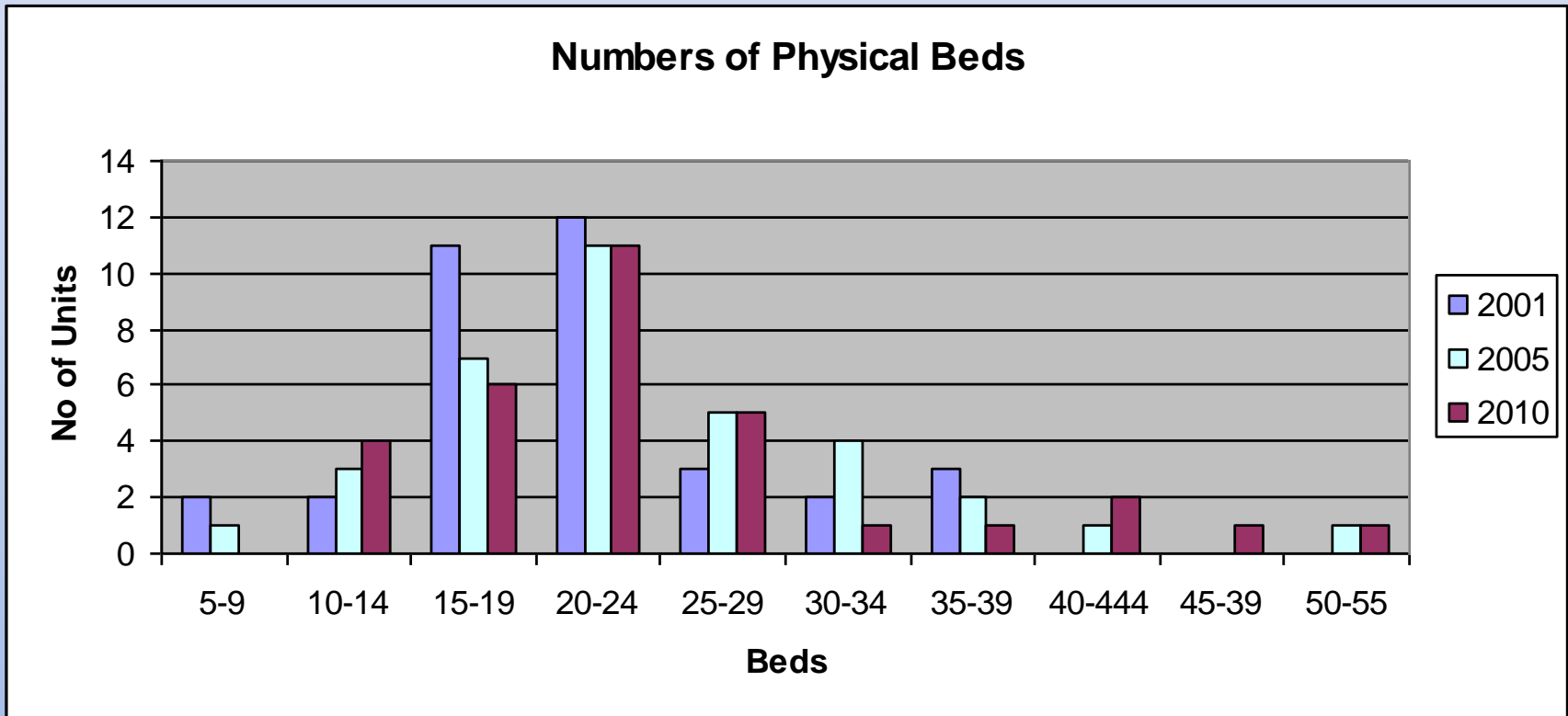
All ICUs 2010



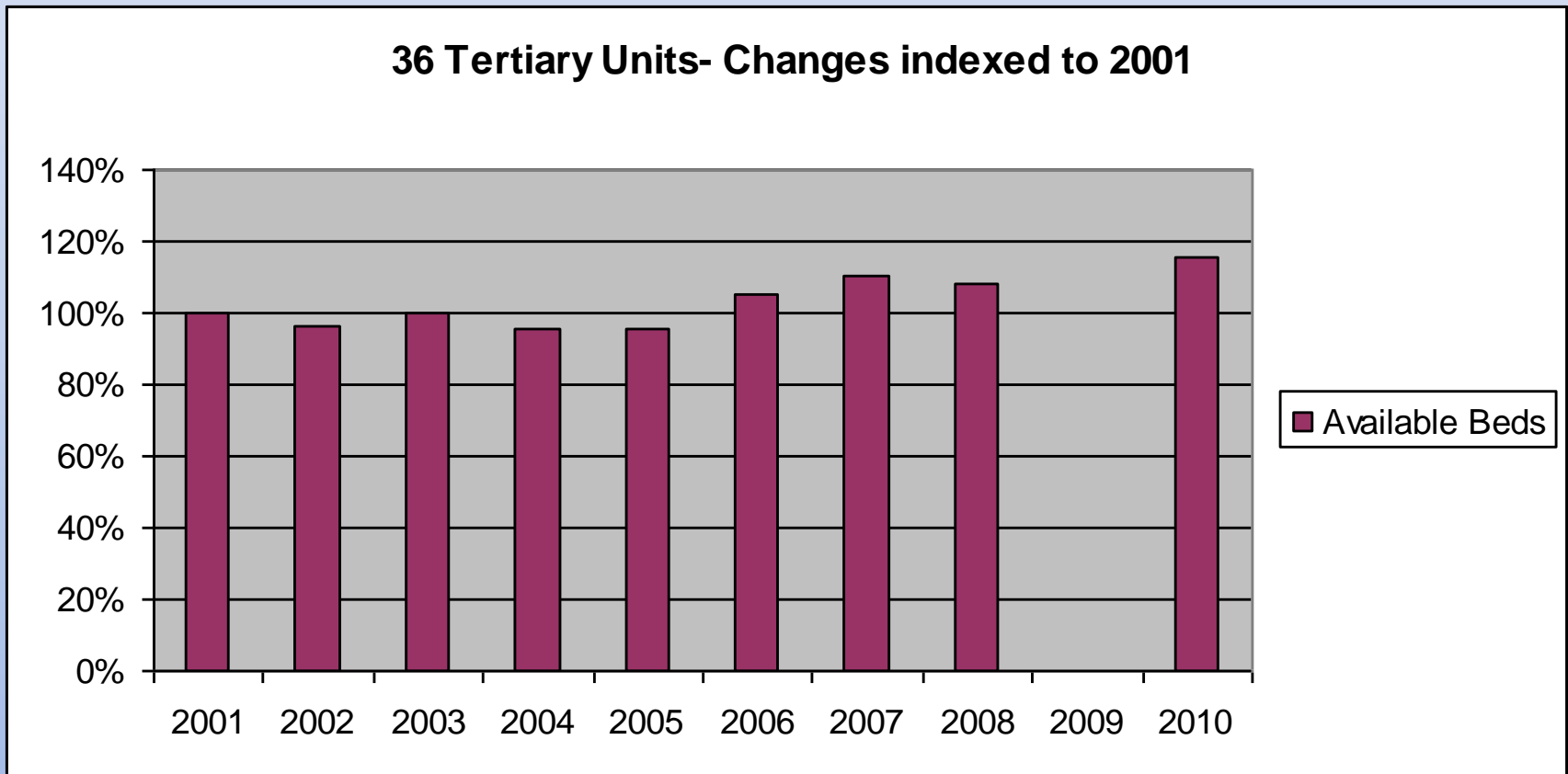
Individual unit changes



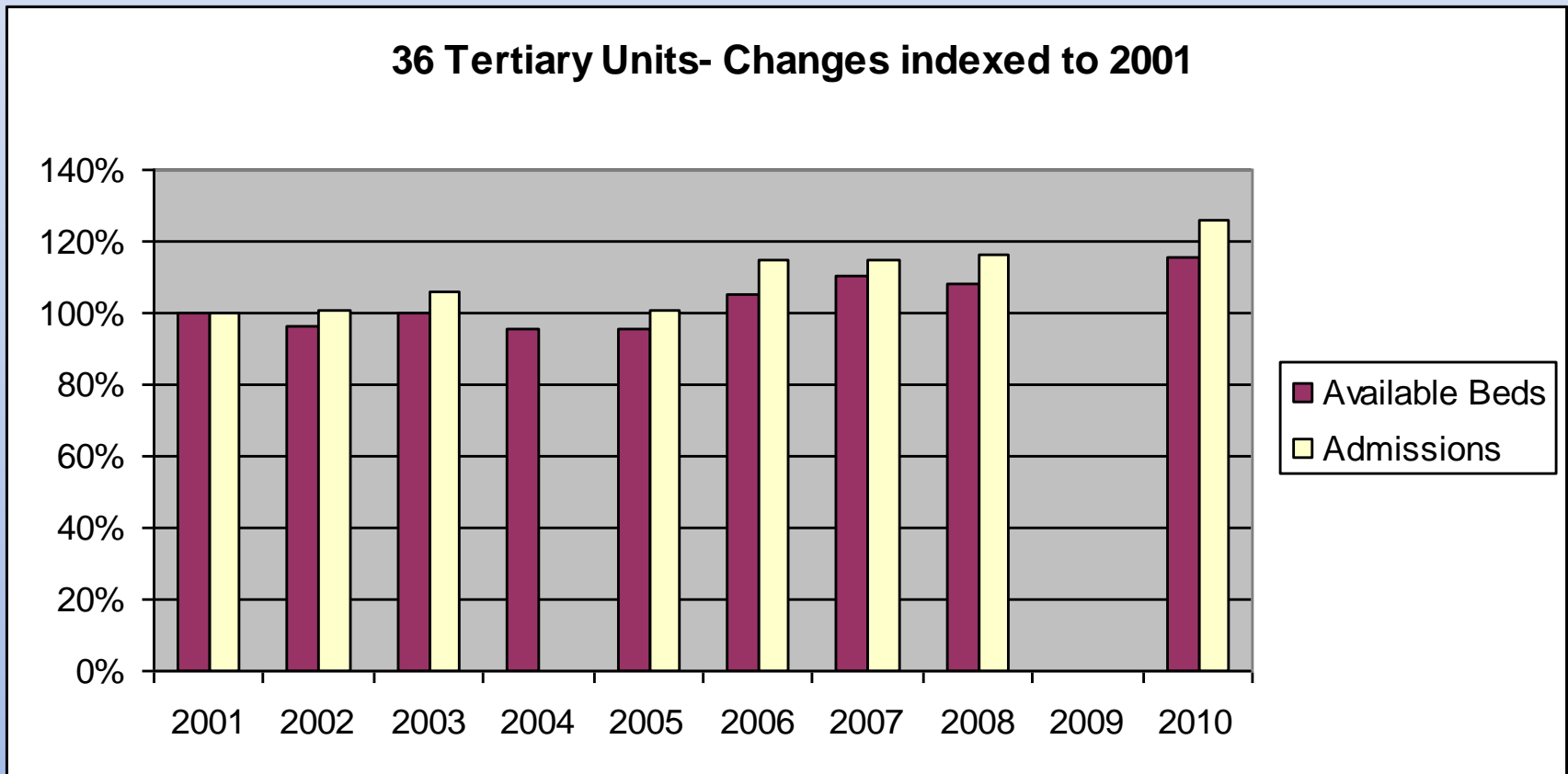
Physical Beds - 36 units



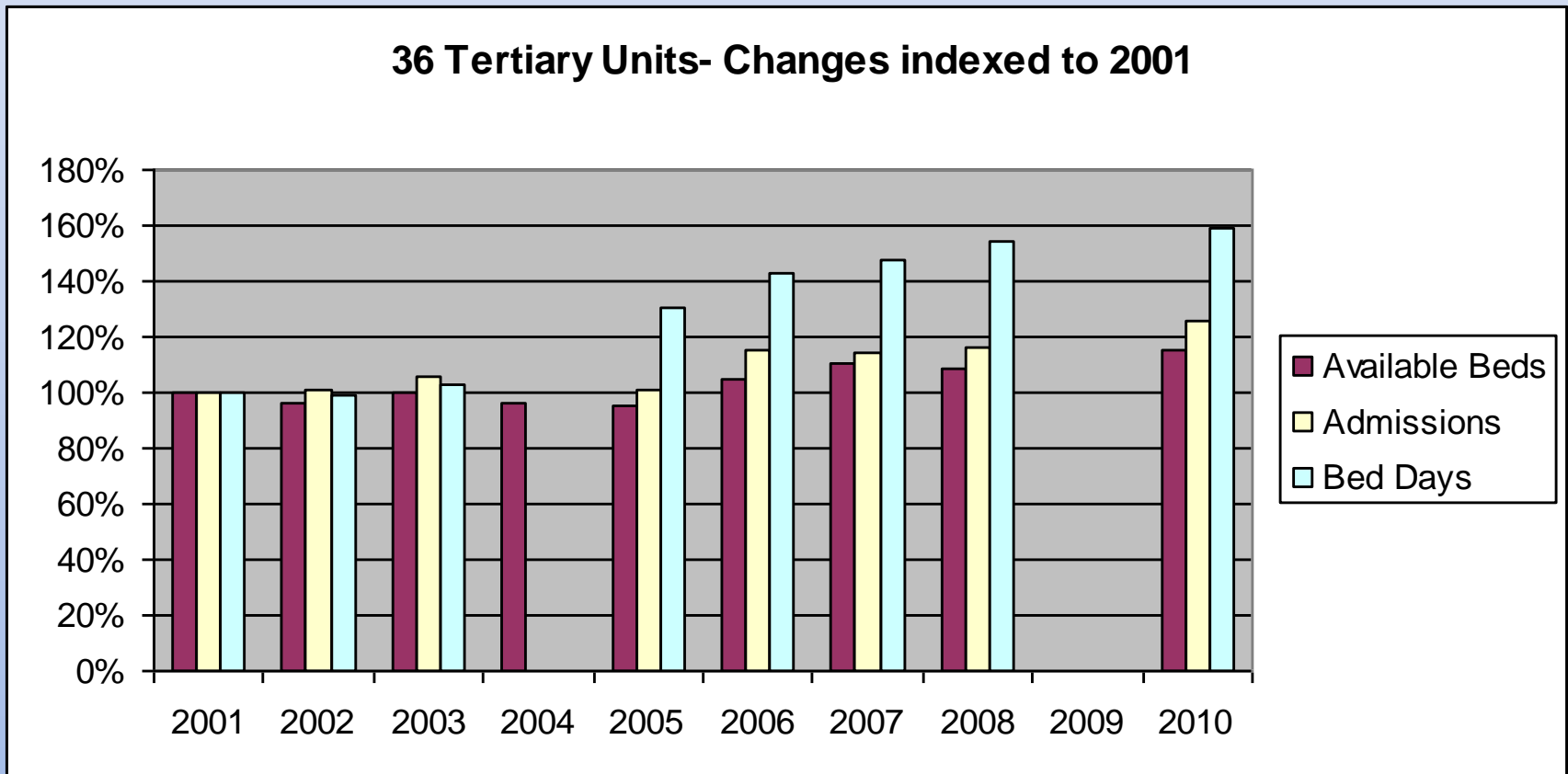
Total Available Beds - increase 14%



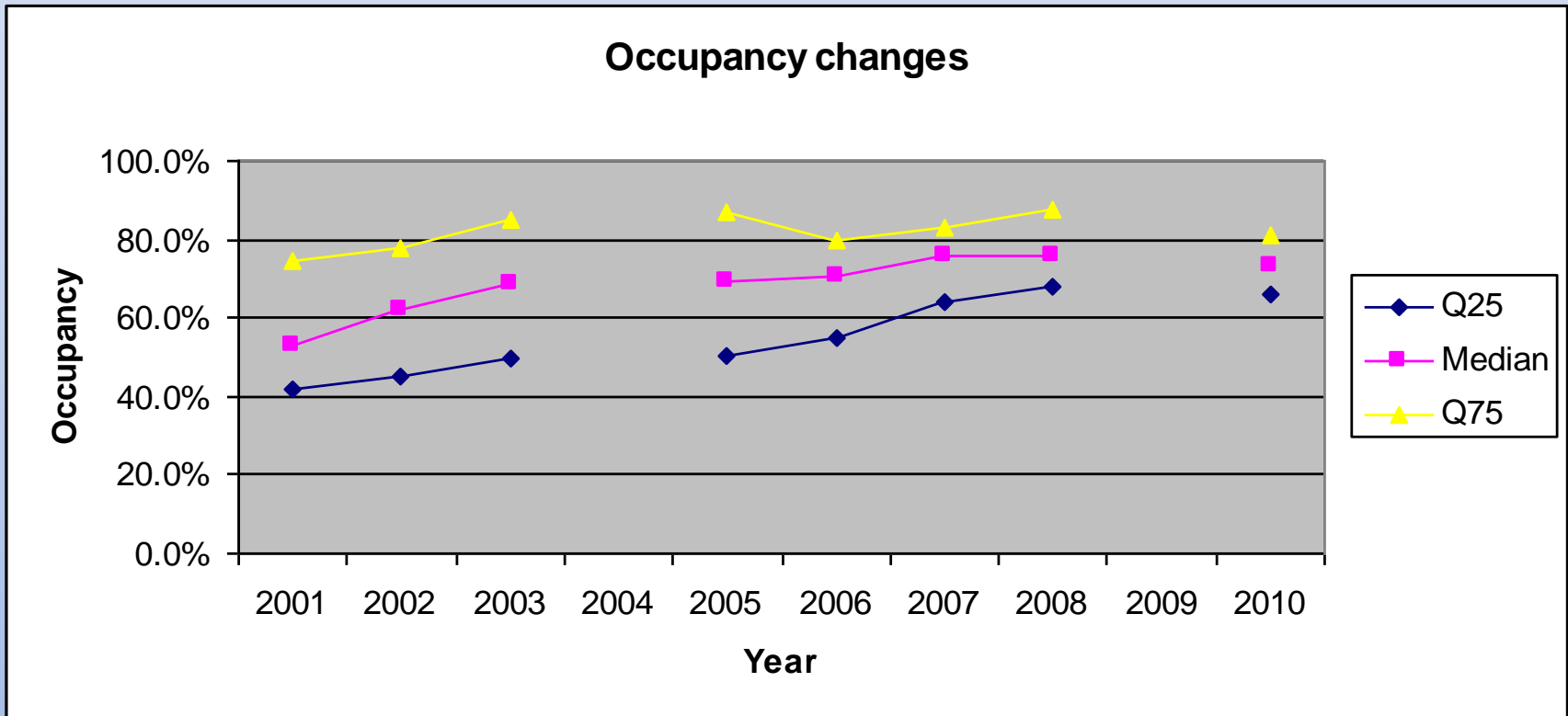
Total Admissions - increase 26%



Total Bed Days - increase 56%

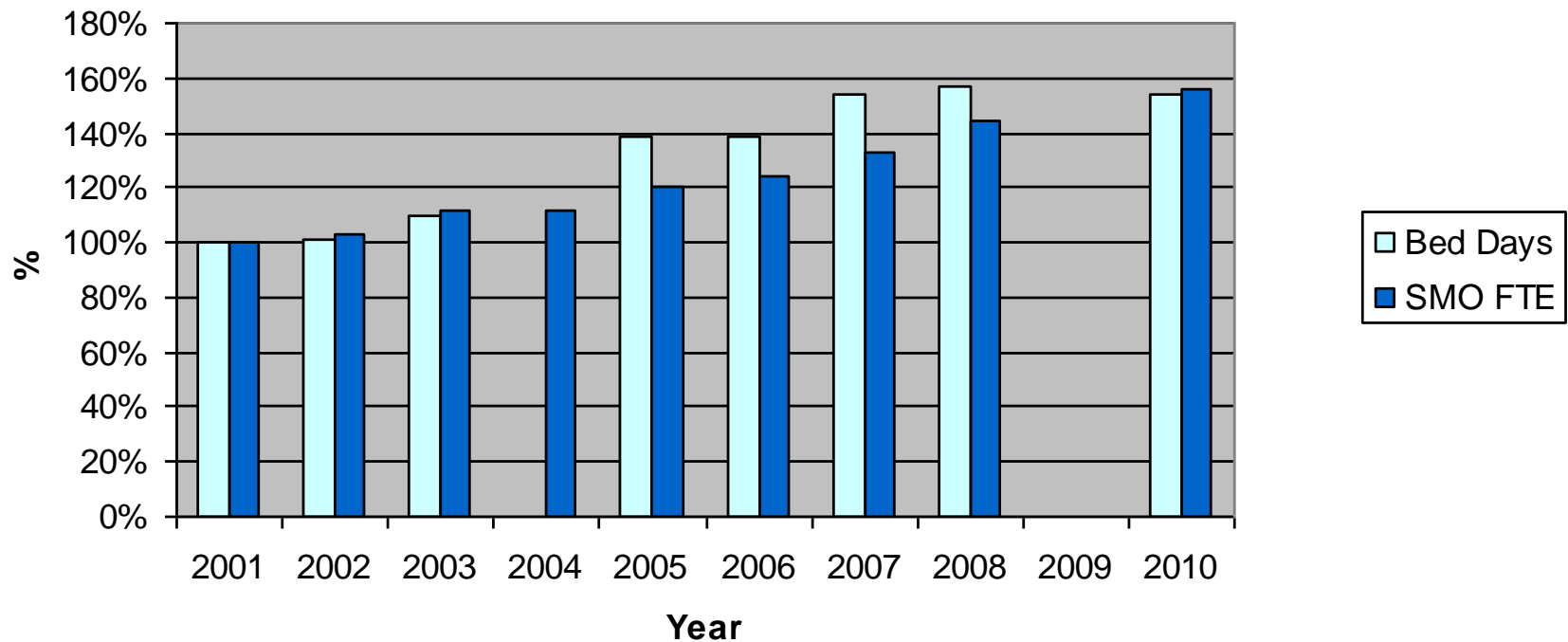


Occupancy median 73%



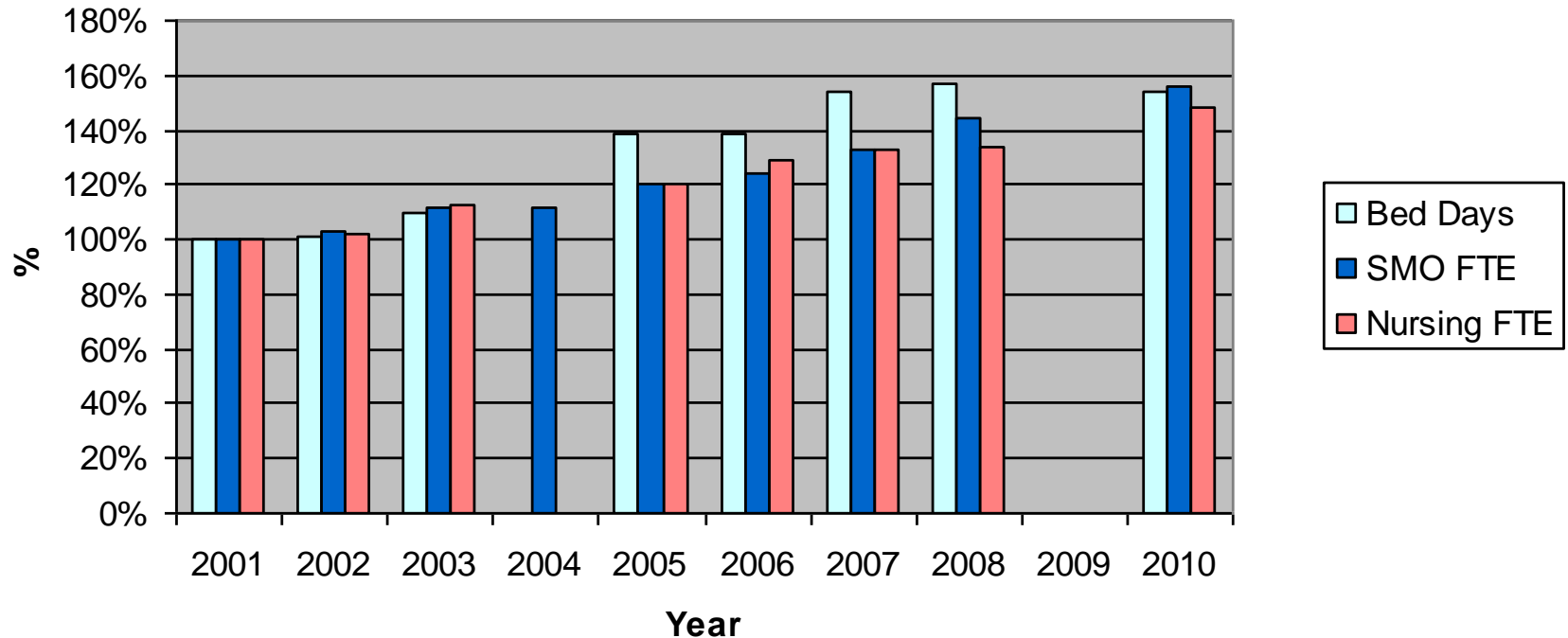
Total SMO FTE - increase 44%

30 Tertiary Units - changes indexed to 2001

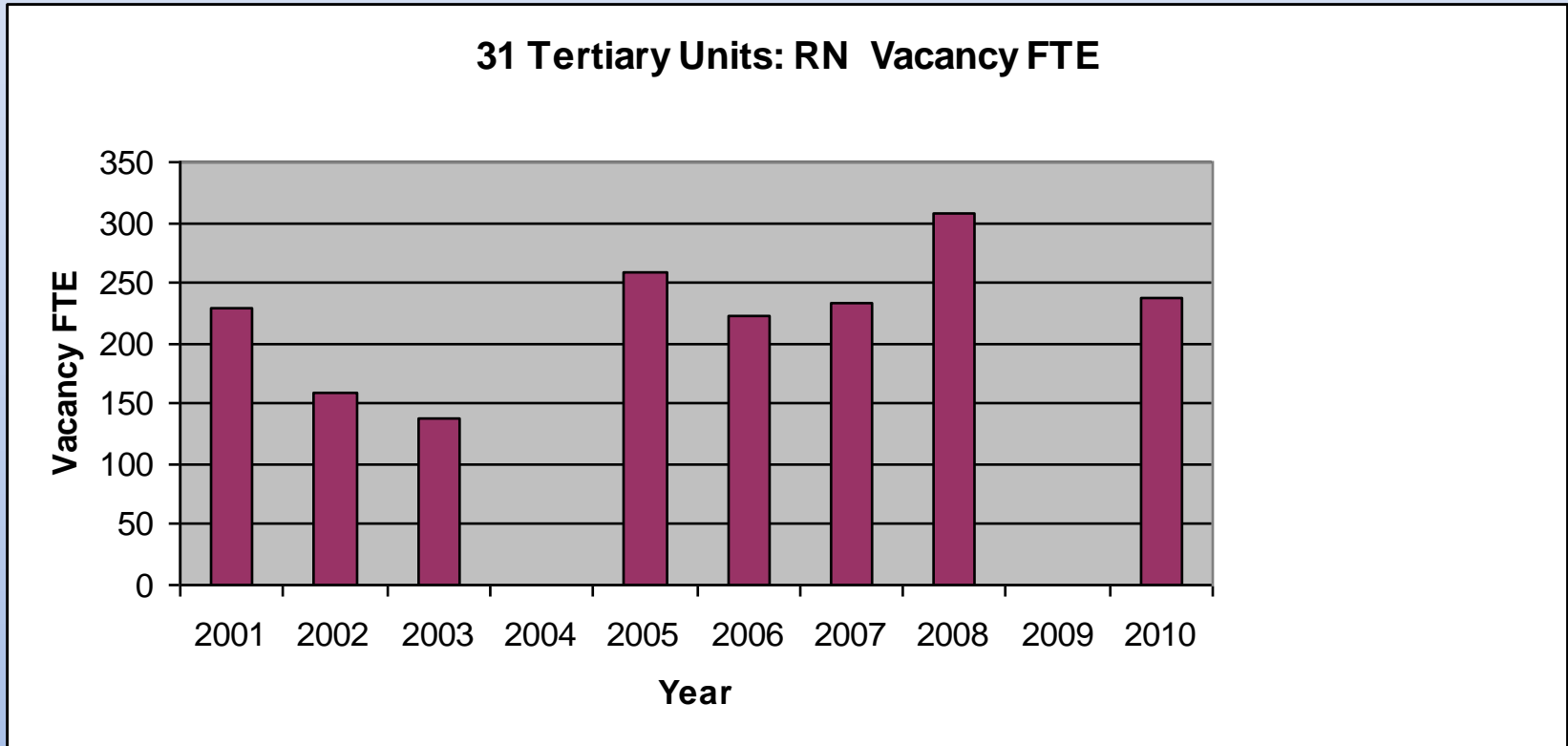


Nursing FTE increase 42%

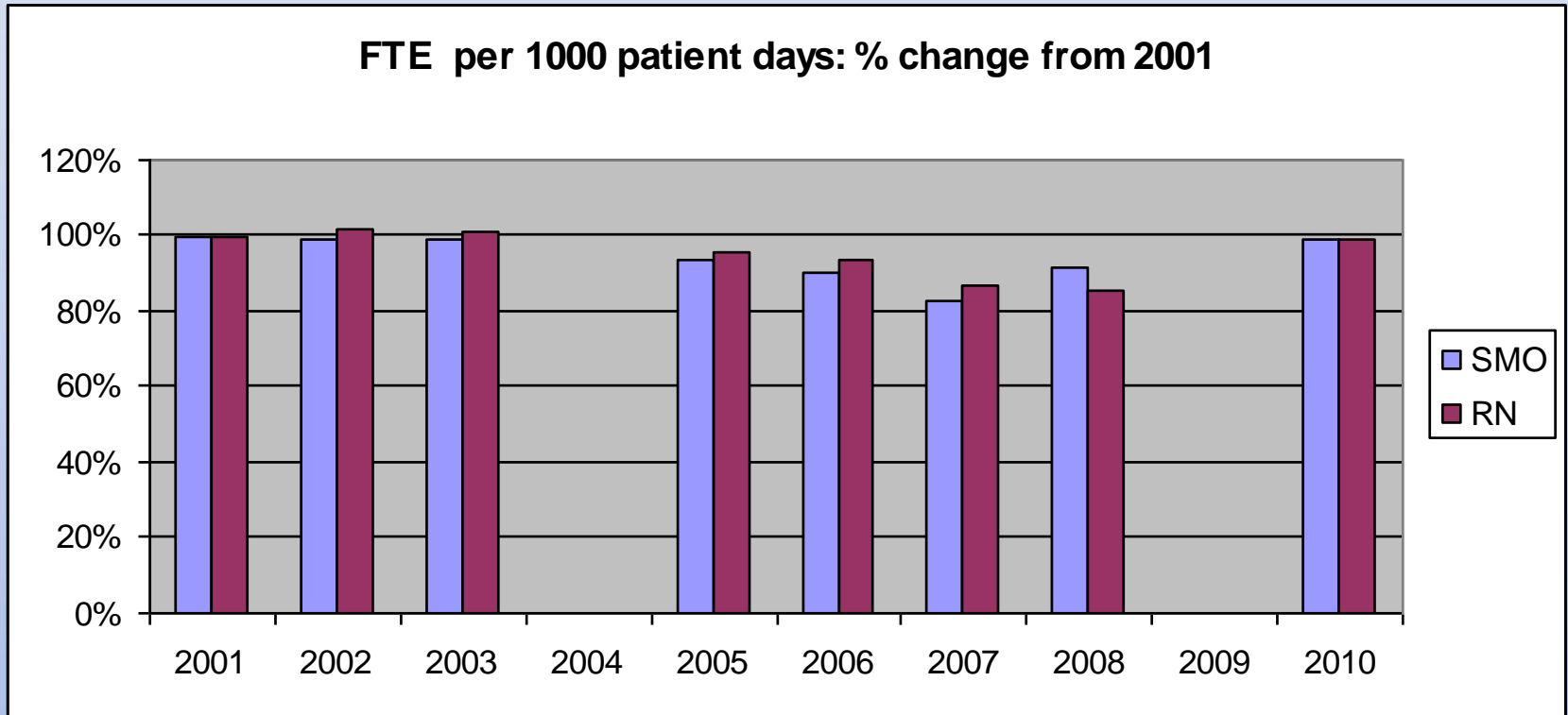
30 Tertiary Units - changes indexed to 2001



Nursing Vacancy



FTE per 1000 pt days

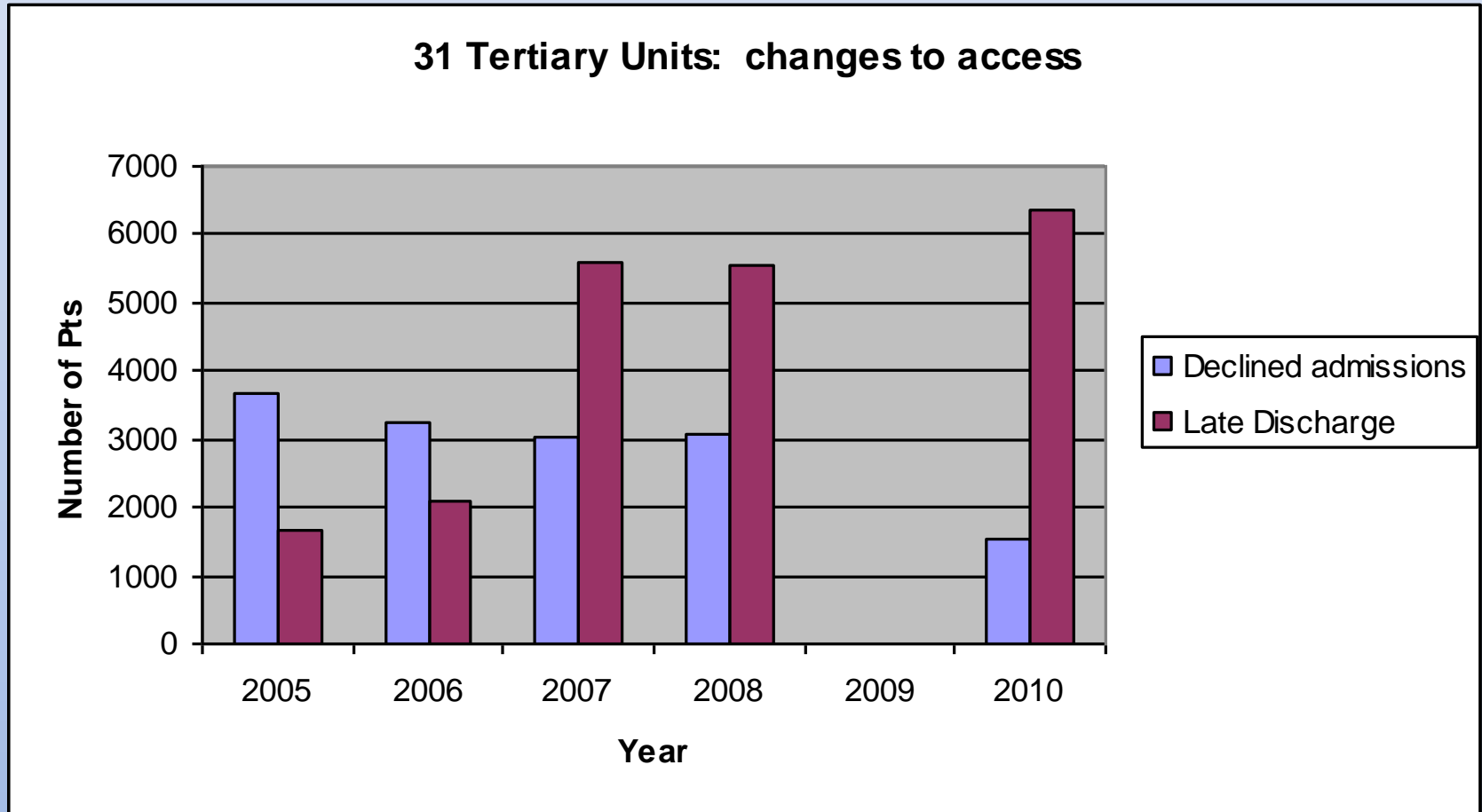


SMO FTE/1000 Pt Days

Average SMO FTE reported by Unit size

Beds	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-50
2008	2.81	1.35	1.07	1.37	1.01	1.28	1.12		XX
2010	2.35	1.42	1.51	1.11	1.28	1.21	1.29		XX

Changes to Access



No change in totals

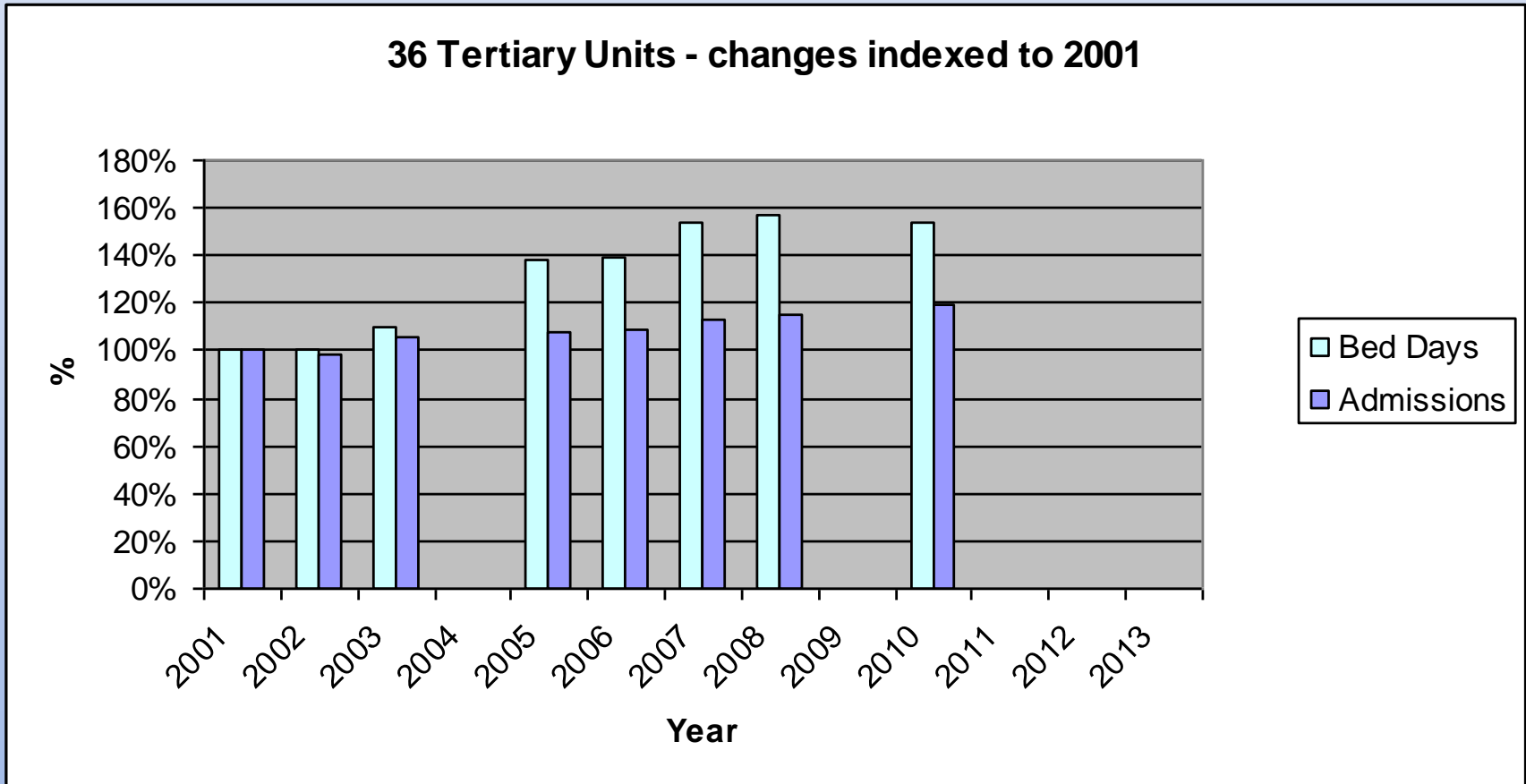
- HDU admissions 32 – 34%
- Ventilated patients 51 – 55%
- Ventilation hours/total 52 – 56%
- Deaths 7.5 – 8.1 %

- Readmissions 4% increased to 6%

Unknown

- Changes in Cost
- Changes in non bedside allocations
- Changes in individual's workload
- Changes in staff satisfaction
- Cause vs association

Future?



Conclusion

- Averaged 5% increase per year
- Activity growing more than beds
- Occupancy has increased
- Staffing lags behind activity
- Access issues have changed
- Much stays the same