



College of Critical Care Medicine

(under auspices of Critical Care Education Foundation)

F- Gemini Park, V. N. Purav Marg, Mankhurd, Mumbai-400088.

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GUIDELINES FOR INTENSIVE CARE UNITS SEEKING ACCREDITATION FOR TRAINING IN INTENSIVE CARE MEDICINE

(Revised October 2013)

PURPOSES OF THIS GUIDE:

1. To outline the process of attaining accreditation of their ICU for intensive care training with the College of Critical Care Medicine (under auspices of Critical Care Education Foundation).
2. To assist in preparation for a review and inspection of the Unit at your Hospital.

A. GENERAL GUIDELINES:

Intensive care units accredited for training by the College of Critical Care Medicine must meet the following criteria:

- a. **Only allopathic (MBBS and above) are accepted as candidates. ICUs must have allopathic doctors in all shifts in the ICU.**
- b. The unit must be fully established and operational and have a head/director who is a Member of the College of Critical Care Medicine (can enroll online as member immediately after inspection).
- c. The hospital should provide a comprehensive range of medical and surgical specialties.
- d. The unit must offer trainees a wide spectrum of experience with an acceptable case load. (Respiratory, Cardiac, Endocrine, Neuro, GI, Trauma, post-op, Poisoning, Obstetrics etc)
- e. There must be access to a wide spectrum of investigations and therapeutic procedures(digital x-rays, CT scan or MRI, ABG, Urine electrolytes, Routine biochemistry, etc).
- f. The unit must have an adequate number of specialized medical, nursing and ancillary staff.
- g. Clinical supervision by appropriately qualified specialist medical staff must be available at all times.
- h. There must be a program of education, which includes a formal teaching program readily available to trainees.
- i. Adequate Critical Care textbooks, journals, guidelines, protocols or clinical care pathways must be available on site, and the trainees should have Internet or Medline access.
- j. Trainees must work adequate hours within the intensive care unit as distinct from high dependency units or other rostered duties.
- k. Unit policies and rosters must ensure that adequate clinical management experience (including performance of procedures) is available to trainees.



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- i. The hospital must agree to notify the College of Critical Care Medicine of any changes that might affect training. Changes such as a reduction in the workload or a reduction in the number of recognized teachers working in the unit are regarded as important.

B. PHYSICAL FACILITIES AND EQUIPMENT

a. The Patient Care Area:

- I. The number of intensive care beds available (minimum of six) should be appropriate to the size and function of the hospital.
- II. The area for each bed should be sufficient to allow easy access to the patient and to allow the deployment of equipment needed to manage the patient.
- III. The design should take into account the serious risk of cross infection. There should be easy access to hand washing from each bed station and it should be possible to isolate individual patients.

b. Equipment:

- I. Equipment available in the unit must be appropriate to the work done in the unit and to the work load, judged by contemporary standards.

c. Support Areas:

- I. Adequate storage space is essential.
- II. There should be a clear separation of clean and dirty working areas.
- III. The unit should have ready access to a teaching area with appropriate facilities.

C. TEACHING: There must be a formal program of teaching provided for trainees.

This teaching will include:

- I. Formal Tutorials/ Lectures.
- II. Daily bedside review of patients with the Intensivist for the unit.
- III. Case presentations
- IV. Review of literature sessions.
- V. Mortality and morbidity sessions.

THE PROCESS:

1. a) An institute interested in seeking recognition of its Intensive Care Units as centers for training in Critical Care Medicine by the College of Critical Care Medicine need to write to the Chairman, College of Critical Care Medicine of their interest.
- b) Along with the Covering letter, the hospital must send a completed “**Hospital Data Sheet for application (College)**”. These documents can also be directly downloaded from the website www.icueducation.com



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2. “Hospital Data Sheet for application (College)” to be returned to the College office (see attached) along with the necessary Inspection and Administrative fee (NON-REFUNDABLE) of Rs. 50,000 (FIFTY THOUSAND ONLY) in form of either:
 - a) Demand Draft favoring “College of Critical Care Medicine” and payable in Mumbai.
 - b) Alternately, this amount may be deposited directly in the College account offline (in a Central Bank of India located in your city) or online (NEFT) transfer as per details below:
Pay to “**College of Critical Care, Central Bank of India a/c 1038110106**”
IFSC code: CBIN0282523 Branch: Mankhurd, Mumbai
3. The College of Critical Care Medicine liaises with the Hospital to confirm an appropriate inspection date, and provide a suggested timetable for the inspection. The travel cost and hotel stay of inspection team is to be reimbursed by the Hospital on actuals.
4. The inspection takes place.
5. Following the inspection, a confidential report is prepared by the Inspection team. The Academic Council decides on approval for accreditation.
6. The Chairman of the College of Critical Care Medicine notifies the Academic Councils decision to the Hospital's CEO/ Medical director of the decision.

THE INSPECTION: The purpose of the visit is to view the physical facilities of the Hospital and Intensive Care Unit, and to interview Hospital staff. An outline of the visit is provided:

A. Physical Facilities to be Inspected:

1. Intensive Care Units
 - a) Clinical area
 - b) Laboratory area
 - c) Storage area
 - d) Room for person on-call
 - e) Storage and service rooms
 - f) Relatives' rooms
2. Other Hospital Areas
 - a) Accident and Emergency Department
 - b) Medical Imaging (CT/X-ray/MRI)
 - c) Relevant laboratories
3. Library
 - a) Department
 - b) Hospital
4. Equipment
 - a) Ventilators
 - b) Defibrillators
 - c) Pace-makers
 - d) Monitors



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B. People to be Interviewed

1. Department of Intensive Care
 - a) Director/Head
 - b) Intensivists
 - c) Registrars
 - d) Senior Staff
2. Proposed teachers
 - a) Intensivists
 - b) Anesthetists
 - c) Physicians, Chest Physicians,
 - d) Cardiologists, Nephrologists
3. Administrators
 - a) Director of Medical Services
 - b) Supervising Nurse of ICU

C. Opinions wanted from Trainee

1. Formal Teaching
 - a) Details of training in past 6 months.
 - b) Quality/ topics.
 - c) Identify areas that need strengthening.
 - d) Availability of time for personal study.
 - e) Provision for time off during exams
 - f) Lecture facilities and training aids (Auditorium and lecture halls are inspected).
2. Intensive Care
 - a) Case mix/ spectrum candidates would be exposed to.
 - b) Quantity and quality of supervision & teaching.

DOCUMENTS TO BE SUBMITTED ON PENDRIVE (at time of inspection): At the time of inspection, following documents must be submitted to the College of Critical Care Medicine as proof of standard of care at the institute:

1. ICU Manual of Policies and Protocols (administrative and Clinical)
2. Infection Control Manual.
3. Format of data collection for quality control, clinical audits.
4. Copy of forms used in ICU (scanned copy)
5. Copy of Hospital data sheet with Name of Institute (eg. XYZ hospital data sheet)

DEBRIEFING

At the completion of the visit, it is usual for the Inspection team to have a round table discussion with the Medical Director and the ICU in-Charge, so that areas of uncertainty can be clarified and problems found can be discussed.

Dr P. K. Jain MD.

Chairman, College of Critical Care Medicine