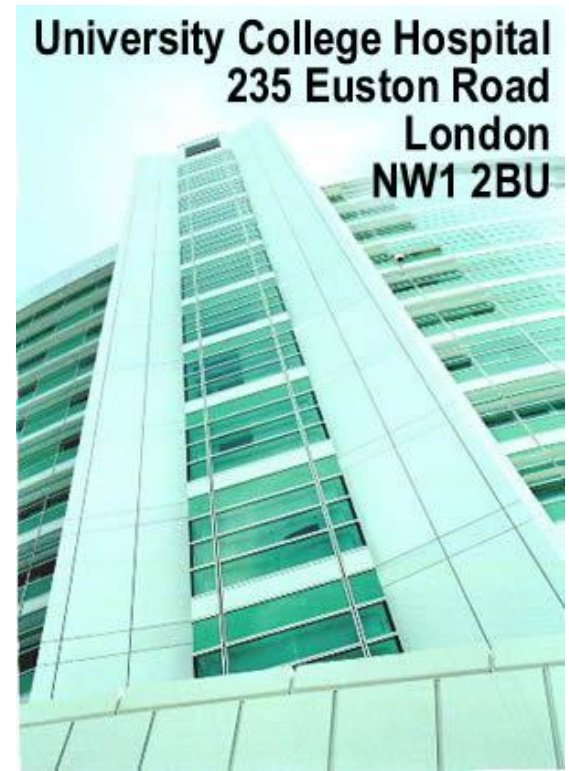


# Role of Medical Director of the Department of Anaesthesia and Perioperative Medicine

Geoff Bellingan  
Medical Director



# UCLH

- Central London teaching hospital
- Founded in 1834
- First major operation under ether - Robert Liston 21 December 1846
- Cruciform building opened 1906
- Middlesex Hospital opened 1745
- Merged with UCLH 1987
- New building 2005

# Picture of old UCLH



# Picture of Middlesex



# Picture of new UCLH



# Size of the Hospital

- UCLH – a Trust (hospital group) consisting of 7 hospitals and:
  - > 7000 staff,
  - @900 beds,
  - 24 operating theatres
  - >65 ICU beds,
  - >400,000 OPD/year,
  - budget of over £700 million

# Picture of new UCLH focusing on theatres and ICU







# How the Hospital is Run

- Exec board – 3 medical directors, Head of HR, Head of nursing, Finance director, CEO
- Medicine
  - A&E and ICU, Medicine, Pathology, Pharmacy, Infection
- Specialist
  - Heart, neuro, women's health, paediatrics, dental/ENT
- Surgery and Cancer
  - Cancer, surgery, GI, Theatres and anaesthesia, Imaging

# Theatres and Anaesthesia

- Theatres and anaesthesia
  - Anaesthesia
  - Theatres
  - Medical Physics
  - Sterile services

- 12 main 2 day and 1 hybrid theatres + obstetric theatres, 4 cardiac theatres and 4 neuro theatres (including interventional MRI)
- >50 anaesthetists
- Trainees
- Theatre nurses
- .....

# What the Medical Director needs assurance on

- Governance
- Safety
- Performance
- Quality
- Innovation
- Research

# In more detail:

## Governance –

- Serious incidents
- Risk register
- WHO checklist
- MRSA, hand hygiene
- Never events
- Single sex agenda
- Patient satisfaction
- Staff satisfaction
- Operations on time
  - Emergency
  - 18 weeks
  - 14 day, 31 day and 62 day cancer
  - 4 hr A&E

# And also...

- Complaints
- Complaints response time
- Training
- Induction
- Preventing bullying
- Culture

# Then we need to ensure that the division is a secure business

- Planning and finance monitoring
- Monitor staff costs, sessions worked, overtime
- Monitor number of empty lists, late lists early finishes, day surgery efficiency
- Monitor spend on drugs and anaesthetic agents
- monitor plans for purchases – equipment etc against budget

# Ensure that the Division work within plans for the whole hospital

- Expand with RNTNE, cancer centre, vascular?
- Contract with Low priority procedures
- New anaesthetic machines
- New IT
- New theatre reception
- New pathways for patient care



# Ensure the Division is robust and competitive

- Benchmark
- Talent spot
- Grow and develop