

Julia Wendon
Kings College Hospital
London, UK

Why consider me / why have I thrown my hat into the ring for the presidency of the ESICM ?

First and perhaps foremost I would truly relish the opportunity to work with all within the ESICM community, across the breadth of critical care services we provide and with associated learned societies to improve the care we provide for patients, their families and each-other.

I am totally committed to practice of critical care, improving the care we deliver, the research which we undertake that drives forward understanding and hence outcomes alongside ensuring we further drive the delivery and support of education for all, and importantly supporting and mentoring the next generations of critical care clinicians. You could say “ there is nothing new here ” and you are correct – it’s the phrases we all use – but I would suggest to you that we are at a point where we have a real opportunity to draw breadth and review; work out what’s great and also what needs to be improved or changed, so that together we can develop services to the benefit of all within the ESICM community. We need to provide to all our members, a society where all feel fully engaged with the ESICM and have a real opportunity to co-produce changes to the benefit of all members and ensure equitable opportunity to all of our members, with transparent governance, accountability and decision making.

I have been a consultant since 1992, working as a clinician, clinical academic and more recently in clinical leadership roles. I have always believed that we are immensely privileged to undertake the jobs we do, providing care for patients and their families, working with amazing colleagues and this sense of team has always been and continues to be the reason to get up and go to work. In addition to unremitting enthusiasm for clinical intensive care and its delivery I have significant experience in research – its delivery, supervision of PhDs, governance and cross organizational programs of work, alongside understanding of financial and governance standards. I have had involvement in the society for the vast majority of my career, as a member, attendee of conferences, recipient of a research grants, deputy chair of a section and national representative, in addition to being privileged to have been invited to lecture and contribute to meetings and conferences. Now is the time to offer something back.

As a profession we have recently had to support patients, their families and colleagues in the management of a totally new disease, COVID. The manner in which colleagues have provided care, undertaken research and driven improved outcomes in the face of pressures which, for many all of us have been quite unique has been astounding to see. We have an urgent need going forward to ensure we provide support and care to our colleagues across critical care medicine, both in the ongoing pandemic and subsequently and to have a professional society in ESICM that is focused on improvement, equitable opportunity for all and provision of a program of care, support and development for our colleagues.

I would also like us as a community, to address the enormous waste we create and to become more “Green.” Surely with our industry partners we can find a way to place central access without generating a sack full of plastic and I would place our carbon footprint alongside developing a sustainability strategy high on our agenda. That includes unnecessary travel.

It is a great honour to even be considered as a potential candidate to serve the ESICM as president. If successful I would be totally committed to working together to further improve care we provide to patients and their families. In doing this I would be relentless in the ensuring that all within the ESICM are represented, their voices heard, and across all aspects of the ESICM there is an embedded culture of equal opportunity with the membership being essential in the codesign of the services provided by the society for its members.

Regardless of the outcome of this vote – what is important is our commitment to continuously improve the care we provide to our patients, their families and our colleagues through provision of education, training, research, clinical guidance and leadership skills. The strength of the ESCM is through its members, their commitment and their actions – let us use this point in time to work together to make positive change and ensure that through mentorship and role modelling we support the next generation of intensive care clinicians to drive improvement and opportunity such that, our students and trainees to exceed our achievements and become our teachers in an environment that relishes and celebrates the achievement of all of our colleagues working together as a cohesive whole.