

Patient information



Information for relatives in ICU

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Introduction

Welcome to our critical care unit which comprises of Intensive Care and High Dependency Care. You may be feeling shocked and confused at the moment if your relative or friend has just been admitted as an emergency. This leaflet aims to help you, but you should ask the staff if you have any questions. There are several specialist consultant Intensivists responsible for the unit, working closely with the original team that admitted your relative or friend, as well as any other specialists they think can help aid their recovery.

Critical Care provides a higher level of monitoring and treatment than on an ordinary ward. Staffing levels are much higher and there is specialist equipment which is only available in this area. Nurses work 12 hour shifts and the nurse in charge is identified by a red badge.

Staff are highly trained in caring for critically ill patients, however caring for relatives and friends is an important part of our role as well. You may feel that you need to talk to someone else about how you are feeling - our Chaplains are available for spiritual/ pastoral support irrespective of faith persuasion. If you have any concerns/complaints please feel free to communicate this to your loved one's nurse, nurse in charge or unit manager who will seek to resolve the matter immediately. Alternatively, if you don't feel comfortable raising the issue with our team then the Patient Advice Liaison Service (PALS) can be contacted on 01284 712555. If your first language is not English or you require additional assistance with communication please let us know.

What happens when a patient is admitted to Critical Care?

When a patient is admitted to critical care it can take some time for the doctors and nurses to assess the patient's condition, attach necessary equipment necessary for observation, initiate treatment and ensure they are comfortable. We aim to update you as soon as we can.

Visiting

There is a significant risk of visiting during the high pandemic peak activity hence why visiting may be restricted. Visiting rules may change even on a daily basis and are dependent on many factors. Please ring the unit in the morning to clarify if you are able to visit. If visiting is permitted, you need to book a time slot which will be for just one nominated NOK and it must remain this specified person for the rest of your relative's admission. It is only in exceptional circumstances that more family members are able to visit. Unfortunately, sometimes we are unable to permit any visitors. We appreciate how difficult this is and we aim to update the next of kin

regularly. However due to high workload this can sometimes be delayed so please do appreciate and understand this. There is an option to communicate with your loved one online via video call if you wish so, and if the patient's clinical condition allows. Please do ask the Dr or the nurse calling you if you wish to have a video call.

If you are allowed to visit, on arrival to the critical care reception (1st floor) please let someone know you have arrived so we can help you visit your loved one. Toilets can be found at the end of the corridor on your right as you enter the hub or in F5 / F6 corridor. Unfortunately, you are unable to make use of the cafeteria/restaurant under current restrictions.

Updates and Questions

We appreciate how frustrating it can be waiting to be updated about your loved ones condition particularly if you are not able to visit. It is our aim to update you daily or when their condition changes. It is helpful if only one nominated person phones for a daily update and lets other loved ones know. The bedside nurse will aim to answer any general queries you may have over the phone, and the doctors can go through this in details. The doctors are available to update you but please be patient if they are very busy looking after other patients. We are able to arrange this for you.

Infection Control

Many of our patients are extremely ill and vulnerable to infection. We request that if you have had any exposure to COVID-19 or symptoms that you stay at home. If you unwell due to other reasons, please discuss with us whether you are able to visit. Please use the alcohol gel dispensers upon entrance of the hospital and wear a face mask. You will be given assistance with additional infection control measures you need to take upon entrance to the unit. Unfortunately, we are not able to allow flowers/ plants onto the unit as they can harbour infection. Staff may wear additional PPE (personal protective equipment) such as mask, visors & gowns.

Car parking

If visiting, there are separate car parks for staff and the general public. The main visitors' car park A is in the front of the hospital. Additional parking is provided at the rear of the site in car park D.

Caring for yourself

It is important to stay well and look after yourself. Make sure you get plenty of rest and eat when you can. Feel free to contact us if worried.

Children

It is not our normal policy to allow children under the age of 16 years to visit for a variety of reasons. Please speak to the nurse in charge if you would like children under this age to visit. This may be accommodated but children need to have careful preparation for what can be a distressing experience - we have separate information booklets for children if you feel these would be helpful.

Pet visitation

Under current circumstances, we are unable to allow pets onto the unit. This will be reviewed as circumstances change.

What might I expect when visiting/ virtual visiting?

Your relative or friend may look very different from the last time you saw them. Their body may be swollen or bruised if they have suffered injury and they may be attached to lots of equipment. There are usually tubes and wires attached to the patients in critical care. Patients in critical care are often unconscious. This may be a result of their illness or the medication they are given to make them sleepy and comfortable. However, a patient may be able to hear even if they cannot respond. Reassuring voices and contact can really help your loved one. Feel free to talk to your relative or friend and let them know you are there. The nurse may also ask you to complete a Patient Profile. Knowing a little more about our patient helps us to provide the best individualized care possible.

As the patient's condition improves, the drugs to keep them sleepy and comfortable will gradually be reduced. Although this is an encouraging phase in recovery everyone will react differently. Some patients will gradually become more conscious and aware of their surroundings, while others may be confused and disorientated. Occasionally patients may be agitated and even aggressive at times. This is quite a common occurrence and staff are familiar with helping the patients through this phase. We understand that this may be very distressing for you and we will do our best to support you during this stressful time.

Monitoring in Critical Care

We use a variety of monitoring equipment for our patients. When visiting, the doctors and nurses are happy to explain what everything is for. Try not to watch the monitors and pumps too much though and ask if you want to know about any changes. Many of our patients are sedated and attached to a ventilator (breathing machine) but we always assume that patients can hear us so we try to speak calmly and reassuringly around the bed. Your voice and touch will be familiar and comforting, so please talk to your loved one normally.

Patients' property

On admission, items of value will be taken to the hospital safe unless you take them away with you on arrival.

Patients in critical care do not need many personal possessions and we ask that possessions are kept to a minimum. Hearing aids, dentures and glasses are helpful to have on admission. The nurse will tell you when any personal items are required to be brought in, when appropriate.

Mixed sex environment

We are very aware that critical care is a mixed sex environment and we do our utmost to ensure that the privacy and dignity of our patients are maintained at all times.

Patient diaries

Some patients (usually those who are sedated) will have a daily diary written for them to help "fill-in-the gaps".

You may find it useful to keep an account at home as well. At the end of their stay on critical care, the diary will be kept with our Follow-up sister who will offer it to the patient or their family at the appropriate time.

How long do patients stay in Critical Care?

The length of time a patient stays on critical care depends on the extent of their illness or injuries. Some patients recover fairly quickly, others may remain in critical care for weeks. Sometimes it may be necessary for a patient to be transferred to another hospital for more specialist care.

Very occasionally it is necessary to transfer a patient to another hospital to make room for a new admission who is too sick to travel. Sadly, recovery is not possible in all cases and despite all the treatments available some patients are too ill to survive.

Reasons for transfer to a different critical care unit

In some cases, to provide the best possible care, we may need to move a patient from one hospital to another. This may happen for one or more of the following reasons:

- A patient requires highly specialised treatment which can only be provided in a different centre.

- A critical care unit is particularly busy and moving patients to a unit which is less busy is considered in order to ensure that the best available care can be provided.
- A patient has recovered enough to not require critical care treatment anymore, but a bed on a non-critical care ward can most rapidly be provided in a different centre.

This is not a decision taken lightly. The consultant in charge will make this difficult decision and you will be kept informed at every step.

This hospital is part of the East of England Adult Critical Care Network which includes the hospitals within Norfolk, Suffolk, Cambridgeshire, Hertfordshire, Bedfordshire and Essex. In the event that our unit becomes unusually busy, we may talk to you / your relative about moving you to a hospital within our network which is less busy.

If hospitals within the network are all unusually busy, we may talk to you / your relative about moving you to a hospital outside the network. In all cases, if a patient requires transfer to another hospital, we will always aim to transfer to the closest centre which has capacity to provide the care which they need.

What happens after Critical Care?

As a patient's condition improves, the level of care they require becomes less intensive. They move from the intensive care area to the high dependency area in critical care and then to the ward. Sometimes patients are transferred straight to the ward if we need to admit someone quickly and there is no other bed available on critical care. Very occasionally patients are discharged home, but only if they are well enough. These decisions are based on what is appropriate and safe for the patient at all times.

The Follow-Up Service

The Follow-up sister visits patients who have been in critical care for 4 days or more as soon after transfer to the ward as possible. They may also see patients who could benefit from speaking to them even if they have been on critical care for less than this time. They will continue to see patients until their discharge home where possible and are available to support you as well. If appropriate both of you are invited to the Follow-up clinic where recovery continues to be monitored and any on- going issues discussed and addressed.

Mobile phones

When visiting, we politely ask that you refrain from using your phone on the unit. If you need to make/answer calls we ask that you leave the unit to do so and keep your phone in silent mode so as to eliminate unnecessary disturbance. Under no circumstances, can photos be taken on the unit as we wish to protect our patients at their most vulnerable. If you desire a photo to be taken of your loved one for their patient diary then this can be arranged using a Trust camera with your consent.

You may see some staff using their phones. This may be to access medical information or to answer their bleep and are the only circumstances it is tolerated.

Satisfaction questionnaires

We would appreciate if you could take the time to complete a questionnaire — these can be provided by your relative's nurse or alternatively can be completed online at

<https://www.oc-meridian.com/WSH/survey/criticalcareservices>

We value and take all feedback seriously to ultimately improve patient/relative experience and the service we give.

Fundraising

Charitable donations are invaluable in enabling us to enhance the care we are able to provide for our patients and relatives and we are thankful for the difference each donation has made.

If you wish to donate you can do so via my wish charity. Email fundraising@wsh.nhs.uk or

Tel 01284 712952

If you would like any information regarding access to the West Suffolk Hospital and its facilities please visit the disabledgo website link below:

<http://www.disabledgo.com/>

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