

# Critical Care Intensive Care Unit (ICU)



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## Information for family and friends

This booklet explains how we care for patients in our Critical Care Unit ICU and what happens when they leave. It also includes information such as visiting times and visitor facilities and how you can help us to prevent the spread of infection. If you have any queries or concerns, please do not hesitate to speak with the nurses or doctors caring for your relative or friend.

### Confirming your identity

Before you have a treatment or procedure, our staff will ask you your **name** and **date of birth** and check your **ID band**. If you don't have an ID band we will also ask you to confirm your address.

**If we don't ask these questions, then please ask us to check.**

Ensuring your safety is our primary concern.

## Why has my relative or friend been admitted to Critical Care ICU?

They have been admitted because their body cannot work normally and they need specialist intensive care. This may be because of an illness or an accident, or after having a major operation.

### What to expect

Seeing your relative or friend in the Critical Care ICU for the first time can be distressing. They may look very different from usual. They are likely to be hooked up to machines and drips. They may need a ventilator machine to help them with their breathing, so they will have a tube in their mouth that goes down into their windpipe. You might at first feel helpless and want to know all you can about their chances of recovery. But your relative or friend will need time to let their body rest and get over the shock of becoming so ill. We will often give them strong painkilling drugs or sedatives to help them to rest and heal.

Nurses will often talk to your relative or friend while they are caring for them, even if they are unconscious. This is because your relative or friend may still be aware of being touched, although they are unlikely to remember things as clearly as they would if they were fully conscious.

You may hear many different alarms from the machines. These let staff know that something – such as a change of drip – needs doing. They help them to keep a close watch on all patients and ensure they get the care they need straight away.

### Who will care for my relative or friend?

Our team includes specialist Critical Care doctors and nurses, speech therapists, physiotherapists, dietitians (food and nutrition specialists), pharmacists and other support staff. They work together to ensure your relative or friend gets the correct treatment and care when they need it.



We also have a chaplaincy service. Please speak to a member of staff if you would like to talk to someone from the chaplaincy team.

## **Our doctors**

The Critical Care ICU is led by a specialist consultant and a team of junior doctors. The consultant changes every week so you may meet several. They and their team usually go around the Critical Care ICU twice a day to check on each patient and make decisions about their treatment and care. They are available 24 hours a day, if needed. Doctors from other specialties such as medicine or surgery who saw your relative or friend before they were admitted may also be involved in their care.

A doctor will speak to you if there is any change in the care of your relative or friend. If you want to discuss anything with a doctor, arrangements will be made for you to talk to a doctor.

## **Our nurses**

Your relative or friend will have a named nurse providing most of their care. The nurse will spend most of their time at your relative or friend's bedside when they are first admitted, giving one-to-one care.

## **Care provided by students**

We provide clinical training where our students get practical experience by treating patients. Please tell your doctor or nurse if you do not want students to be involved in your care. Your treatment will not be affected by your decision.

## **Daily routine**

We plan each day around the individual needs of your relative or friend and try to keep to as normal a day / night routine as possible. However, a lot of the care we provide has to be done around the clock.



Mornings tend to be the busiest time. There is a consultant-led ward round from about 10am – 1pm where the doctors and nurses discuss your relative or friend's progress and care, examine them, decide on treatment and make a plan for the rest of the day.

A team of physiotherapists and an occupational therapist visit the unit in the morning to help with patient rehabilitation.

Your relative or friend's hygiene needs will be met throughout the day and will have their main wash late evening.

There is often an evening consultant-led ward round from about 5 – 7pm.

## **Leaving Critical Care**

Your friend or relative will be moved to a regular ward when their condition has improved and they no longer need the same level of care.

The Critical Care consultant and the consultant in charge of your relative or friend's overall care (that is, a member of the medical or surgical team) will be involved in making the decision to move them.

If there is a delay in a bed being available, they will stay in Critical Care but will be monitored less closely and their nurse may look after other patients as well as your friend or relative. We will also take out some of the lines used to check their blood pressure and to give them fluids and drugs.

## **Rehabilitation**

Leaving Critical Care is a really positive step towards recovery from critical illness. The emphasis will shift to your friend or relative's ongoing rehabilitation. This may take some time but it is important to remember that everyone is different; although the steps they take may be small, they all count towards their recovery.



How long your relative or friend takes to recover depends on several things, such as how severe their illness was, how long they were in Critical Care, the procedures and tests they had, any medical conditions they already had and how their body coped with the illness.

It is normal for them – and for you – to feel frustrated that they cannot get back to normal very quickly. There are people they can talk to about this, such as the doctors, nurses and therapists on the ward or members of the Critical Care team.

The Critical Care therapy team, ward team and other health professionals such as physiotherapists, occupational therapists and speech and language therapists will be involved in assessing your friend or relative's rehabilitation needs and setting their goals. Plans will also be made for the next steps in their recovery.

## **CCU follow-up clinic and patient diary**

We may invite you to a CCU follow-up clinic about six months after you have left hospital. This is a chance for you to talk about your stay and experiences, including talking through your patient diary, and following up on any medical or other problems.

Your patient diary aims to help you understand your stay on the CCU because you may remember very little about what happened. We asked staff and visitors to add to this diary when you were with us, to help you make sense of any time you may feel you have lost by being so unwell.

## **Visiting**

We encourage you to visit your relative or friend so you can support your loved one and get updates on how they are doing.

At certain times you may be asked to wait in the visitors' room while we care for your relative or friend.



## Valuables

We advise you to take home any of your relative's valuable belongings or items that they do not need in hospital. We cannot accept liability for the loss of items that are not handed over to staff for safekeeping.

## Infection control: help us to prevent the spread of infection

**Wash your hands:** Infection is usually spread by your hands so please wash yours when you arrive and when you leave Critical Care using a squirt of hand wash foam. Make sure you cover the whole of your hands with the foam and rub it in well for 30 seconds until dry. You will find hand wash foam dispensers around Critical Care and at every bed space. **Please let us know if any of them need refilling.**

These infection control procedures apply to staff as well. You can ask our staff to clean their hands – they will be happy to do so.

**Do not visit if you are unwell:** This includes illnesses such as diarrhoea and/or vomiting and minor infections such as a cold. Wait until 48 hours after your last episode of diarrhoea and/or vomiting or cold symptoms before visiting again.

**Visiting with children:** Check with the nurse in charge before bringing babies or young children to visit.

**At the bedside:** Do not sit on you relative of friend's bed or use their chair. For health and safety reasons, do not bring in any food or drink unless you have first checked with the nurse in charge.

**Isolation:** If your relative or friend has a specific infection or is at increased risk of having it they may be moved to a side room and put in isolation. The nurse or doctor responsible for their care can answer questions about this and advise you on washing your hands, and/or wearing aprons and/or masks.



We check all patients admitted to Critical Care for methicillin-resistant *Staphylococcus aureus* (MRSA) and Carbapenemase-Producing Enterobacteriaceae (CPE). You will find leaflets explaining how we test for, treat and prevent the spread of these bacteria (germs) in the waiting area.

We aim to maintain the highest standards of cleanliness so if you have any concerns about the cleanliness of Critical Care, please do not hesitate to speak to the nurse in charge.

## Visitor facilities

### Shops and cafes

**General shop:** Main entrance, South Wing, Level 1

Monday to Friday, 8am – 8pm; Saturday and Sunday, 8.30am – 8pm

**Cafe Qualita:** Main entrance, South Wing, Level 1

Monday to Friday, 7am – 7pm; Saturday and Sunday, 8am – 6pm

**Main restaurant:** Down main corridor from reception, South Wing, Level 1

Monday to Friday, 7am – 4pm;

Saturday and Sunday, 11.30am – 2.30pm

**Self-service vending machines:** Main restaurant and ED

24 hours a day, seven days a week

**Cash machine/ATM (free to use):** South Wing, Level 1, opposite the restaurant

### Parking

There is limited pay and display parking on site with spaces for disabled badge holders. More spaces are available in the Sainsbury's supermarket car park, close to the hospital (parking charges apply).



## Taxis

Free phone to book taxis, main reception area, South Wing, Level 1.

## How are we doing?

You can help us to improve services for all Critical Care patients by answering a few simple questions. Complete the online PRUH Critical Care – Relative/Carer survey at the link below (click on Critical Care under 'Online surveys') or scan the QR code:

**[www.kch.nhs.uk/about/how-are-we-doing](http://www.kch.nhs.uk/about/how-are-we-doing)**



## Who can I contact with queries and concerns?

### Critical Care

Tel: 01689 864090 / 01689 864091

### PALS

The Patient Advice and Liaison Service (PALS) is a service that offers support, information and assistance to patients, relatives and visitors. They can also provide help and advice if you have a concern or complaint that staff have not been able to resolve for you. The PALS office is in the main hospital foyer at PRUH and they would be happy to advise you.

Tel: **01689 863252**

Email: **[kch-tr.palskent@nhs.net](mailto:kch-tr.palskent@nhs.net)**

You can also contact us by using our online form at

**[www.kch.nhs.uk/contact/pals](http://www.kch.nhs.uk/contact/pals)**

**If you would like the information in this leaflet in a different language or format, please contact PALS on 01689 863252.**