



East Kent Critical Care

Information for visitors to East Kent Critical Care



This leaflet has been produced to help you understand what happens on a Critical Care Unit.



Critical Care is an umbrella term used to cover Level 3 (Intensive Care) and Level 2 (High Dependency) Care. You may also have heard the term Intensive Therapy Unit (ITU), this is an older term, which is generally no longer used.

Critical Care provides care to unstable or critically unwell patients. Patients may be admitted to Critical Care:

- as an emergency due to serious illness, injury, or urgent surgery
- as a planned admission after routine but complex surgery; or
- for special care which needs constant, close monitoring.

If you have a relative admitted to Critical Care we recognise this can be a very stressful time for you. It is quite normal to feel upset when you see someone you care for in Critical Care. Patients are often sedated (given drugs to make them calm or sleep) whilst they are cared for, as they are very ill.

Staff are always available to speak to you and answer any questions you may have. If you would like to speak to a doctor, please let a member of staff know who will arrange this for you.

How long will my relative/friend stay in Critical Care?

The length of time a patient stays in Critical Care depends on their illness or injuries. Some patients will recover fairly quickly, whilst others may remain in Critical Care for a longer time. Unfortunately, recovery is not possible in all cases and sometimes a patient may die.

What do I need to know about visiting Critical Care?

A buzzer is on the wall outside Critical Care, which you will have to press and then speak through a video linked system to gain entry to the unit. You will speak to a member of staff who will ask you who you are visiting and advise you whether it is appropriate for you to visit at that time. If it is not possible, you will be offered a seat in our relatives' rest area.

We also restrict the number of visitors to two per patient, at any one time. Children may visit but please ask the nurse in charge before you visit.

Sometimes you may be asked to leave Critical Care while a specific treatment is carried out. This may take a few minutes or a few hours, depending on the treatment.

Is there anything I can do to help?

Many patients have quite vague memories of their stay in Critical Care, usually due to the medications they are given. One of the clearest memories that most people report is the voices of their friends and family. They do not remember specific conversations, but have a feeling of familiarity. So talking to them can have a calming influence.

It would help us if you could complete a form called **Critical Care Individual Profile** to tell us about your loved one. This helps us learn about their likes and dislikes, and to talk to them about something they are interested in. You are welcome to bring in CDs and DVDs, but make sure you label them so they do not get mixed up with ours.

To help patients understand what has happened to them during their stay in hospital, we may start a patient diary which you can write in as well. For more information, please ask a member of staff for a copy of the Trust leaflet **Critical Care Units Patient Diaries**.

- **Staying overnight.** In emergencies, it may be possible for you to stay overnight at the hospital; this will be arranged with the nurse in charge.
- **Plants and flowers** are not permitted in Critical Care.

Can I telephone Critical Care to check on my relative?

Yes. You are welcome to telephone the unit at any time to ask about the condition of your relative. However, if you have a big family we would ask you to choose one person to make these enquiries and for them to liaise with the rest of your family. We understand that it is not always possible but it does help staff, by saving them time which can then be devoted to patient care.

Please be aware that we are limited in the medical information that we are able to give over the telephone.

We aim to have open visiting, which means you can visit at any time of the day. However, we do try to encourage quiet times so our patients can rest, which may differ from each unit.

Contact numbers for each of our sites

- **East Kent Critical Care, Kent and Canterbury Hospital, Canterbury**
Telephone: 01227 78 31 04
- **East Kent Critical Care, Queen Elizabeth the Queen Mother Hospital, Margate**
Telephone: 01843 23 44 15
- **East Kent Critical Care, William Harvey Hospital, Ashford**
Telephone: 01233 61 61 14

How can I expect my loved one to look?

Your loved one will probably look very different from the last time you saw them. They may be attached to equipment which will be surrounded by lots of tubes and wires. They may also be attached to a drip which allows fluids and drugs to be given, usually in the side of the neck, arm, or hand. They may look swollen, which can be a side effect of the treatment they are receiving. The doctors and nurses will be able to explain how the machines are helping the patient.

What equipment is in Critical Care?

- **Bedside monitor**

Patients in Critical Care need constant, close monitoring of their vital signs. This screen displays information on heart rate, blood pressure, and oxygen saturation, along with other information. The doctors and nurses will keep track of these figures to help the treatment of your relative or friend. The monitor will alarm from time to time but it is important not to worry, as most of the time the alarm is used to tell the staff they may need to attend to the patient, not necessarily that something concerning has happened. The nurse will be happy to explain what the numbers mean but please try not to worry about them too much as they are constantly monitored and will continually change.



Bedside monitor

- **Ventilator**

This “breathing machine” is used when patients are not able to breathe well for themselves. The reasons for being on a ventilator can be different for each patient. Ventilators help support patients by breathing for them or supporting their own breathing. We can also use the ventilator to deliver high concentrations of oxygen and medications directly into the lungs.



Ventilator

- **Flowtron pump**

Patients in Critical Care are at risk of developing deep vein thrombosis (DVT). In order to reduce this risk, we use a specialist pump connected to stockings that inflate and deflate regularly to simulate the forces created by walking.



Flowtron pump

- **Haemofiltration machine**

This machine supports patients whose kidneys have failed because of their illness. The kidneys play an important role in cleaning the blood by removing toxins and excess fluid. When kidneys fail we use these machines to perform the function of the kidneys.



Haemofiltration machine

- **Bed**

These beds are specifically designed for use with critical care patients. One of the risks of being in Critical Care is developing pressure sores or bed sores from not moving. We use these beds to turn patients regularly to reduce this risk. We also use air filled mattresses that constantly move to relieve pressure and reduce the risk of pressure sores developing.



Bed

- **Syringe pump and volumetric pump**

The **syringe pump** is used to deliver medication to your relative or friend. These pumps are very sensitive and accurate. We use these pumps to give powerful medications in very small amounts.

The **volumetric pump** is used to deliver large infusions such as fluids or medications.



Syringe pump



Volumetric pump

Both types of pumps will alarm frequently during the day. Again, like the monitor, please do not worry if it alarms. Most of the time it alarms to tell the nurse that they may need to intervene rather than that something concerning has happened. The alarms often sound to tell the nurse that the infusion has almost finished, which gives the nurse plenty of time to prepare a new infusion before it runs out, if it needs to be continued.

- **Nasogastric (NG) tube**

An NG tube is a tube that is inserted into the stomach through the nose. It allows liquid feed to be delivered directly into the stomach. If the digestive system does not work, liquid feed may also be inserted into the veins.

- **X-rays** are performed in Critical Care by a portable machine. You will be asked to go with the nursing staff while these are being done. There is no danger but as we are exposed to x-rays on a daily basis we take precautions to prevent unnecessary exposure.

How long will my relative's recovery take?

It is not always possible for doctors to know how long a patient's recovery will take. Patients in Critical Care are often weak, so it is possible for serious complications to develop in addition to their original problems. The doctors will always give you as much information as they can.

What support is available for my relative after they have been discharged from Critical Care?

Leaving Critical Care can be a very scary thought and can cause great anxiety. We aim to make this move as stress free as possible.

- Many long-term patients will be **transferred to the HDU** (High Dependency Unit) before discharge, in order to make sure a smooth transition in to the ward. We try to create an environment similar to that of the wards, with visiting times and structured routines.
- Following discharge on to the wards, patients are often followed up by the **Critical Care Outreach Team**. The Team includes a number of Critical Care nurses who visit patients on the ward and offer additional care and support when needed. For more information ask a member of Critical Care staff for a copy of the **Critical Care Outreach Team** leaflet.

- **Follow-up and rehabilitation** is offered to patients who have had a long or complicated stay on Critical Care. The team are available on the wards and by telephone, once the patients have gone home. Patients are then offered a follow-up clinic appointment, a Critical Care rehabilitation class, and an accompanied visit to Critical Care. For more information, please ask a member of staff for a copy of the **Your recovery after your time in Intensive Care (ICU)** leaflet.

Does the hospital have a chaplain?

Yes. The Trust has a chaplain on all three hospital sites who will be pleased to help you or your relative with any religious needs you may have, whatever your denomination.

You can contact a chaplain at any time through our hospital switchboard telephone 01227 76 68 77.

Please remember to look after yourself

During your relative's stay in Critical Care it can sometimes be very tense and frustrating for you but it is important that you take care of yourself. Please try to get some rest as often as you can.

Further information

If you have any questions or concerns regarding your relatives care or condition, please speak to a member of nursing staff. Please remember that the staff are able to help and advise you at all times, as and when you need it.

We would very much appreciate if you would be able to give us feedback on the level of care received whilst in Critical Care. We have a patient/relative satisfaction survey. If you would like to give us feedback and have not received a survey yet, please ask a member of staff for the form.

Useful links

- East Kent Critical Care
Web: explainmyprocedure.com/ekhufticu
- East Kent Hospitals Critical Care
Web: www.ekhufft.nhs.uk/patients-and-visitors/services/critical-care/
- NHS: Intensive care
Web: www.nhs.uk/conditions/intensive-care/
- ICUsteps
Web: www.icusteps.org
- ICUsteps guide for patients and relatives
Web: www.icusteps.org/information/guide-to-intensive-care
- Intensive Care Society: patients and relatives
Web: www.ics.ac.uk/Society/Patients_and_Relatives/Patients_and_Relatives

Useful telephone numbers

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- East Kent Critical Care, Queen Elizabeth the Queen Mother Hospital, Margate
Telephone: 01843 23 44 15
- East Kent Critical Care, William Harvey Hospital, Ashford
Telephone: 01233 61 61 14
- Patient Advice and Liaison Service (PALS) Telephone: 01227 78 31 45
- CRUSE East Kent (bereavement counselling) Telephone: 07507 65 60 23
- CRUSE Helpline (bereavement counselling) Telephone: 0808 80 81 67 7
- Headway Telephone: 0808 800 22 44
Email: helpline@headway.org.uk
- Spinal Injuries Association Telephone: 0800 98 005 01
- Stroke Association Telephone: 0303 33 100
Email: info@stroke.org.uk
- The Samaritans Telephone: 11 61 23
Email: jo@samaritans.org.uk
- Drugs and Alcohol Helpline (Forward Trust) Telephone: 0300 12 31 18 6
- Organ donation Telephone: 0300 1 23 23 23

This leaflet has been produced with and for patients and their families

If you would like this information in **another language, audio, Braille, Easy Read, or large print** please ask a member of staff. You can ask someone to contact us on your behalf.

Any complaints, comments, concerns, or compliments please speak to your doctor or nurse, or contact the Patient Advice and Liaison Service (PALS) on 01227 78 31 45, or email ekh-tr.pals@nhs.net

Patients should not bring in large sums of money or valuables into hospital. Please note that East Kent Hospitals accepts no responsibility for the loss or damage to personal property, unless the property had been handed in to Trust staff for safe-keeping.

Further patient leaflets are available via the East Kent Hospitals web site www.ekhuft.nhs.uk/patientinformation