

Healthier Communities,  
Outstanding Care



Sherwood Forest Hospitals  
NHS Foundation Trust

## Booklet 2

# Information for patients leaving the Adult Critical Care Unit

Information for patients and visitors



**This booklet is designed to help you and your family during your recovery on the ward after your stay in the Adult Critical Care Unit (AACCU). If there is anything you are uncertain about, please do not hesitate to ask a member of staff.**

## **What is the ACCU?**

The ACCU is an area where patients who are very ill, in need of very close monitoring and treatments not available on the wards are cared for by specially trained healthcare professionals.

You may not remember anything about your stay in ACCU, or perhaps some of your memories may be a bit muddled. This is normal after being so ill.

## **How long have I been in ACCU?**

**Admission date:**

**Transfer details:**

**You were in the ACCU for \_\_\_\_\_ day/s**

## **What information do I need when I go to the ward?**

**Ward information:**

**Ward telephone number:**

**Visiting times: 11.30am-7pm**

Some wards may vary slightly so please check with the nurse in charge.

## **What will change when I go to a ward?**

When you are well enough, you will be transferred to a ward. This can be quite stressful as you may have spent a long time on ACCU, but moving to a ward is a positive step.

The ward environment is different from the unit and these changes may make you feel anxious or frightened. While you were on ACCU you and your relatives will have become familiar with the staff and the routine, so it is normal to feel unsettled about moving to a new place.

The critical care team will provide the staff on the ward with information that will help them to understand how ill you have been, what you are able to do for yourself and the treatment or assistance you still require.

On the ward there will be less monitoring and you should have noticed this has become less as you started to improve on ACCU. This too can provoke anxiety, but it is a sign you are getting better. You will not have so much equipment around you on the ward and you may not have your observations (respiratory rate, pulse, blood pressure and temperature) recorded as often as before. Do not worry. This means you are getting better.

## **Who will look after me on the ward?**

The nurses on the ward will introduce themselves to you and continue your care.

You will notice there are fewer nurses on the ward than on ACCU. This is because there are more patients on the ward who are not as ill as those on ACCU. The nurses are always nearby and you can get help by using the nurse call buzzer.

There will also be more health care support workers to help with your needs. When you leave ACCU you will be visited by a member of the critical care outreach team (CCOT) on the ward. They routinely 'follow up' everyone discharged from ACCU.

The CCOT nurse will ensure your recovery and rehabilitation continues and will support the nurses on the wards with providing for your needs. The CCOT nurse will provide you and your relatives with the opportunity to talk about your experience on ACCU and answer any questions you may have.

Other professionals will continue to provide your ongoing care once back on the ward such as the physiotherapist, dietitian, pharmacist, speech and language therapist, occupational therapist and other specialist nurses.

## **Will I be able to eat and drink?**

Depending on what has been wrong with you, the nurses on ACCU and on the ward will know what type of diet you require and whether or not you can drink. Please ask if you are unsure.

If you can eat, you may find your appetite is slow to return to normal. This is because you may not have eaten much since you became ill. You may have been fed by a tube up your nose, into your stomach or via a drip into one of your veins. You may still need these now that you are on the ward.

You may find that food does not taste the same, particularly if you have been on a ventilator (breathing machine) for a long time. Common changes include a metallic taste in the mouth or food may seem sweeter than normal or have no flavour at all. This will settle with time.

You might be referred to a dietitian who will help you. Follow the advice, but try to eat a wide variety of food - bitter, sour, savoury, warm and cold. This will help your taste buds return to normal.

To ensure you have no swallowing problems you may also see the speech and language therapist, particularly if you had a tracheostomy on the ACCU (a tube which allows you to breathe through a hole in your neck rather than your nose). You may be given exercises to help with your speech and swallowing.

The ward nurse will observe what you are eating. You may be given fortified drinks or food such as nourishing porridge, whole milk and puddings. If you are worried, a nurse will be available to discuss your eating and drinking and may refer you to a specialist.

Depending on what treatment you have had, you may find you have a change in your bowel habits. You may be constipated, have diarrhoea or loose stools. This is common in patients who have been on ACCU. You have not been walking around or doing normal activities for a while and have been on drugs which may have slowed your digestive processes down during this time. It is important to remember these are only temporary problems which should return to normal. The nurses can offer advice on any worries you may have.

## Sleep

ACCU can be noisy occasionally and due to your illness your sleeping pattern may have changed. You may find it difficult to sleep or sleep for short periods only. Try to relax and have a warm bath if possible. Have a hot milky drink, read or watch the television.

If you are still finding it difficult to sleep tell the nurse. Sometimes it may be possible to prescribe something to help you sleep. If you do not need close observation, moving to a single room or simply having the curtains closed round your bed may help you to sleep better.

Sometimes patients may experience nightmares or 'flash back' memories of their time in ACCU. These may appear real, vivid and frightening. They could occur for a few days until you settle on to the ward. If they continue, discuss them with the nurse or ask the ward staff to contact the critical care outreach team.

It may be that some events are unclear and that you would benefit from talking about your experiences. If you were given a diary, written by staff and visitors while you were ill on ACCU, it may help to read this. Ask your relatives to talk about what happened to you. A visit to ACCU when you have improved sufficiently may help to put these thoughts to rest. If you wish to do this, please ask the nurse on the ward or ring ACCU to arrange it.

## **How can I be helped to get back to normal?**

After critical illness, it is common to find it difficult to do things you usually take for granted. You may need help with washing and dressing, moving in bed or getting to the toilet. It may be that you cannot get out of bed yourself or walk very far without help, especially if you have been ill for a long time. The two main reasons for this are:

- You may feel weak, tired and stiff because you have not been able to use your muscles while you have been ill.
- Increased activity may cause you more discomfort or make you more short of breath.

You will have been seen by a physiotherapist on ACCU. This will continue on the ward. The physiotherapist will ensure your chest remains clear and will monitor your breathing. You will be given exercises to improve your muscle strength and help you get stronger.

You may need walking aids such as a frame or stick as you recover to help you walk. Staff will be aware of what you can and cannot do and will assess how you progress. Other healthcare specialists may also be involved in your ward care to ensure you continue to recover well.

You may be referred to an occupational therapist who will help with the functional tasks such as, washing and dressing. They will also be involved in ensuring you are safe to return home, when it is appropriate.

Family and friends may be tempted to try to do everything for you. They have seen how ill you were on ACCU and may be afraid you might hurt yourself. It is much better for your muscles, joints, heart, lungs and your morale if you try to do things yourself, but if you are unsure please ask the nurse caring for you.

## **What if I feel breathless?**

You may feel breathless, but this improves as the muscles you use for breathing become stronger. Gradually increasing the amount of activity that you do will help this. The physiotherapist will assess you and may give you exercises to do.

You may return to the ward with a tracheostomy (a tube in a hole in your neck to help you breathe).

This will be cared for by the nurses on the ward, the physiotherapist, critical care outreach and other specialist staff. Hopefully it will be removed once your breathing muscles have improved.

During this time talking, eating and drinking may be difficult or you may be unable to do these things. This can be stressful, but with support and explanation we will help you and your family understand what we are doing for you and how we aim to remove this tube over a period of time. This may involve using different equipment, all of which will be fully explained to you before it is used. If required, we will give you aids to help you communicate with the healthcare professionals and your visitors.

The physiotherapist will give you breathing exercises to do as it is important to take deep breaths and cough regularly. If you are unable to do this because you have pain or your sputum is thick, please inform the staff. To help with your breathing you can:

- Settle into a relaxed position, lean forward or relax when sitting.
- Sit forward. Leaning over a table may help.
- Sit as upright in bed as possible.
- Keep your upper chest and shoulders as relaxed as possible.
- Feel your stomach and your lower ribs expand as you breathe in.
- The more relaxed you are, the easier it will be to breathe out.
- Ensure you have sufficient pain medication. You must inform a member of staff if you are unable to do these exercises because of discomfort.

Try to move your legs and feet while in bed to prevent complications. This helps to move the blood around your body. These exercises should be done hourly and try to avoid crossing your legs. You may also be receiving 'blood thinning' injections and wearing stockings. These are all treatments to reduce the risk of clots forming in your leg veins. Please follow the advice from the nurses, doctors and other healthcare professionals.

## **What about my family and friends?**

Although you may not remember much about your illness, it has probably been a very difficult time for your family and friends.

It is common for patients to remember nothing about the ACCU and this can be frustrating for you.

You may find your progress slow and frustrating, but your friends and family will notice the improvements all the time. The move to the ward is a big step in your recovery.

While in ACCU your relatives may have felt they could do nothing to help you.

They may now appear over protective. This may be their way of showing how much they care. Your relatives have been through a difficult time too.

## How will I feel?

You may notice that your appearance has changed during your illness. You may have some weight and hair loss, dry skin or a sore mouth. You may also notice new scars or wounds. The doctors and nurses will explain what these are.

As you improve you will notice these problems fade.

Feeling 'normal' again can take a long time and be a slow process. Do not expect too much of yourself, take each day at a time. Try to face it with a positive attitude. If you are depressed you may already be on a small dose of antidepressants, but if not, and you feel depressed or low in mood, antidepressants could help. Discuss these feelings with the nurses and doctors caring for you.

Aim for small achievable targets each day. This will help you see how you are getting better.

It is not uncommon for you to feel very different after a serious illness, both physically and emotionally. You may experience some good and bad days, having some ups and downs. Being irritable or tearful for no apparent reason is quite usual after being very ill.

## What can I expect on discharge from hospital?

After your stay in ACCU there may be some issues you are concerned about. These could be related to memories of before, during or after your admission to the ACCU, or worries about your health now.

Members of the multi-professional team will discuss with you and your family what you may need at home to make it a little easier for you as you continue to improve.

Throughout your ACCU stay and time on the wards the multi-professional team will have been assessing and planning for your rehabilitation needs and implementing a plan of care to help you achieve washing, dressing and everyday tasks.

Some patients make a full recovery before they leave the hospital and do not require any further assistance, but some need support after they return home. If this is the case, about two months after you leave the ACCU, you will be contacted by telephone to see how you are managing. You may be invited to return to the ACCU for a critical care follow up clinic appointment. You can bring a friend or relative if you wish and, if transport is a problem, we may be able to arrange this.

During the appointment you will have the chance to speak with specialist healthcare professionals from the ACCU about your recovery, rehabilitation and time spent on the unit. They can offer further advice or help on getting back to normal at home and discuss any physical or psychological problems you may be concerned about. Attendance at the clinic provides an opportunity for your relatives to discuss any concerns they may have too.

Further follow up clinic appointments may be required, but this will be discussed at your initial visit.

If you feel you are having problems, are not coping well once you have left, wish to visit the ACCU when you are feeling better, or you have returned home and wish to talk to someone, please ring us. You may phone ACCU at any time on **01623 672268** to make any enquiries or ask questions, or alternatively you can contact the ACCU Family Liaison Team Monday to Friday 8am to 4pm on 07584 331 934.

If we cannot help with your concerns or enquiries the Patient Experience Team (PETs) situated in the main entrance of the King's Treatment Centre will be happy to discuss any concerns. Please contact them by visiting their office or telephoning 01623 672222.

## Research

Advances in medical knowledge and treatment have been brought about by research. Research is undertaken in this ACCU and across the country. All these research trials are approved by an independent ethics committee of outside experts to make sure the patients' best interests are protected.

Patients and relatives may be asked to be involved in this research. A member of staff will discuss any research trials which may involve you and discuss issues about consent and taking part or not. Further information on taking part and research is available by asking any member of the nursing staff.

**The Intensive Care Society** also offers a website for relatives of patients who have been, or are in, ACCU. It is useful for further information and provides an opportunity to discuss your feelings online. This can be found at [www.ics.ac.uk](http://www.ics.ac.uk) or they can be contacted by writing to:

The Intensive Care Society  
29B Montague Street  
London  
WC1B 5BW

Telephone: 0207 291 0690

Our Chaplaincy team may be able to help and they can be contacted on telephone number **01623 622515**, extension **3047**.



**Please feel free to use the following pages to write anything down to bring to follow up clinic.**

**Further information is at the end of this booklet.**







### **Further sources of information**

**ICU Steps:** [www.icusteps.org](http://www.icusteps.org)

**Our website:** [www.sfh-tr.nhs.uk](http://www.sfh-tr.nhs.uk)

**King's Mill Hospital:**

01623 672222

**Newark Hospital:**

01636 685692

**Email:** [sfh-tr.PET@nhs.net](mailto:sfh-tr.PET@nhs.net)

If you have any questions regarding your ACCU stay, you can contact the Critical Care Family Liaison Team on 07584 331 934, Monday - Friday 8am to 4pm.

### **Patient Experience Team (PET)**

PET is available to help with any of your compliments, concerns or complaints, and will ensure a prompt and efficient service.

If you would like this information in an alternative format, for example large print or easy read, or if you need help with communicating with us, for example because you use British Sign Language, please let us know. You can call the Patient Experience Team on 01623 672222 or email [sfh-tr.PET@nhs.net](mailto:sfh-tr.PET@nhs.net).

This document is intended for information purposes only and should not replace advice that your relevant health professional would give you. External websites may be referred to in specific cases. Any external websites are provided for your information and convenience.

We cannot accept responsibility for the information found on them. If you require a full list of references (if relevant) for this leaflet, please email [sfh-tr.patientinformation@nhs.net](mailto:sfh-tr.patientinformation@nhs.net) or telephone 01623 622515, extension 6927.

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