Critical care rehabilitation

History

Research on the longer-term consequences of critical illness has shown that significant numbers of patients surviving critical illness have important continuing problems. For many, discharge from critical care is the start of an uncertain journey to recovery. Continuing health problems can be physical and non-physical. Some examples are physical weakness, loss of energy, anxiety, depression, post-traumatic stress syndrome and for some, a loss of mental faculty (termed cognitive function). These complications can occur because of medication, treatment and the severity of illness whilst in critical care. Many families may also suffer financial strain as well as strain on their health and emotional resources. Recovery from illness is highly individual, patients who have had prolonged episodes of critical illness are likely to have greater long-term difficulties; however patients with relatively short critical care stays may also need substantial help.

In 2009 the National Institute of Clinical Excellence (NICE), published clinical guidelines “Rehabilitation after critical illness”. The guidelines offer best practice advice on the care of adults with rehabilitation needs as a result of a period of critical illness. Based on the clinical guidance and the experiences of previous critical care patients and relatives, a rehabilitation pathway was developed for patients at Gateshead Health Foundation trust.

How it works

The pathway (treatment plan) is aimed at patients who have received Level 3 care for more than three days. This is because these patients are deemed to be at greatest risk of developing physical and non-physical complications.

The pathway is coordinated by a team of professionals including, a nurse practitioner, a physiotherapist and a health care assistant. Between them they will provide the patient and their family with any information they require about their recovery. The pathway starts whilst they are in critical care, its aims are to prevent the patient from developing any complications and to minimise the effects of this which can not be avoided.

It is recognised that following critical illness patients can suffer memory distortions and periods of amnesia. Many patients have no memory of their Critical Care stay at all. This can, if left untreated, develop into a more complex psychological problem. Research informs us that if a detailed diary is kept for Critical Care patients that this can have positive results. In critical care at Gateshead a photo diary is started for all patients who are mechanically ventilated for three days or more. The diaries are designed to provide a factual account of what has happened in Critical Care, to fill in memory gaps. They also seek to promote the seriousness of what has occurred and to provide a context for any inaccurate or delusional beliefs. Family members are encouraged to write in the diary along with the critical care team. The diary and the photographs will be given to patients by a member of the rehabilitation team. An explanation of the patient’s critical care stay will also be given at the same time. This will be done once the patient is discharged to the general ward.

On the general ward the rehabilitation team will visit patients on the pathway as often as necessary. This may be three times a week or three times a day. They will work alongside the patient to develop rehabilitation goals and an individualised self-directed exercise programme. They will carry out health checks to identify any problems the patient may face because of their illness. The rehabilitation team will provide support, facilitation and encouragement to achieve these goals so that the patient can recover as quickly as possible.
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The support the patient will require when they are discharged from hospital will vary depending on many factors including their personal circumstances, illness and length of hospital stay. Once the patient has been discharged from hospital their recovery will be well underway however, many patients still have further to go before they will be completely better.

It will take several months until their strength is back to normal and the emotional impact of having been critical ill can last for some time.

This prolonged recovery period can lead to several problems including experiencing considerable levels of anxiety and depression. For many patients the recovery phase of their illness is the most stressful. As part of the patient rehabilitation pathway the rehabilitation practitioner will telephone them at home to discuss their progress, and any problems they have encountered.

Approximately eight weeks after discharge the patient will be invited to a clinic appointment with the rehabilitation team to review their progress. If there are any outstanding physical or non physical complications at this point they will be referred to the appropriate professional or service for further assessment or treatment.

Support Group

ICU steps is a registered charity. It was founded by former intensive care patients, relatives and health professionals. It was developed to provide on-going support after discharge for patients and relatives who have encountered critical illness.

This support is provided in the form of “drop-in meetings” where patients and relatives can come and talk to others who may be further down the recovery journey to share similar experiences. Sharing experiences with others has helped people understand that they’re not alone in what they feel and think and that more often than not, what they’ve experienced is normal for someone who’s been through a period of critical illness.

Meeting others who’ve been through similar experiences and are at different stages in their recovery can help reassure patients and relatives that there is light at the end of the tunnel and dispel much of their worry. Whether you’re an ex-patient or a relative, being able to talk about what you’ve been through with people who understand, because they’ve been through it too, can really help. If you feel ready to talk, listen and share your experiences, we’d like to meet you. Maybe you can help someone else!

For any further questions or help please contact:

Aileen Rooney (Rehabilitation Practitioner) or Sonia Elliott (Rehabilitation Assistant) on:
0191 445 32 10 bleep 3145