Introduction

This booklet is written for you, the family and friends of patients. We hope it will answer many of your questions about Intensive Care and the Churchill Hospital, and help to relieve some of the anxieties that you may be feeling.

Please do not hesitate to ask a member of staff for any additional information.

How to voice any concerns that you may have:

Please contact the Senior Nurse on the shift in the first instance. If that does not resolve the issue to your satisfaction please contact our Matron, Jane Woollard.

An appointment can be made through her Personal Assistant, Lorraine Soanes. Her contact number is 01865 220620.
Contents page

- About Intensive Care 2
- Intensive Care Staff 3
- Relatives Comment Page
- What a relative or visitor can expect during the first few days 4
- Remember to look after yourselves 7
- Visiting the Unit 8
- Telephone Numbers 9
- Accommodation 9
- Parking and Travelling 10
- Patients Personal Belongings and Needs 10
- Smoking 10
- Security 10
- About the Churchill Hospital 11
- Facilities within the Churchill Hospital 12
- Supporting Agencies 14
- Help with English 15
- Map of Oxford 16
About Intensive Care

The Churchill Intensive Care Unit (CICU) cares for adult patients who are critically ill or need constant observation and care.

The aim of the CICU is to provide high standards of care to patients, and to support visitors and relatives as best we can. All staff strive to maintain these standards.

A wide range of equipment is used to help us care for our patients. These machines can appear daunting at first, but the staff will explain this equipment to you.

CICU has eight beds, six on the main unit and two isolation side rooms.
Intensive Care Staff

Our Clinical Director, Dr Jon Salmon, leads the Unit. His medical team consists of several Consultants, namely: Dr Stuart Benham, Dr Henry Bettinson, Dr Jonathan Chantler, Dr Claire Colebourn, Dr Oliver Dyar, Dr Christopher Garrard, Dr John Griffiths, Dr Simon Hughes,

Dr Neil McGuire, Dr Stuart McKechnie, Dr Julian Millo, Dr Jon Salmon, Dr Peter Watkinson, Dr Douglas Wilkinson and Dr Duncan Young. The Consultants rotate a couple of times each week and lead a team caring for your relative.

Our Matron, Jane Woollard, leads the Nursing Staff with a team of Senior Nurses, one of whom should be on each shift. Senior nursing staff wear navy blue uniforms.

A multidisciplinary team looks after all patients on the CICU. These include Nurses, Doctors, Physiotherapists, Dieticians, Pharmacists, and Administration Staff.

Each patient has one nurse caring for him / her each shift, providing 24 hour care.

The nursing shift pattern is:

07:30 to 20:00
19:30 to 08:00

Occasionally your relative or friend may be cared for by a nurse working a shorter shift.
What a relative or visitor can expect during the first few days

Your relative or friend may have been admitted to the Churchill Intensive Care Unit (CICU) for a variety of reasons. They may have had an operation and need specialist and close observation for the first 12 - 24 hours. Alternatively, it may be because their body is not working normally and if they do not get special help, there may be serious long-term effects on their health or they may die. We understand that this is a worrying and stressful time for you and the information below may help explain some of what may happen:

When one of your relatives or friends is first
admitted to an Intensive Care Unit (ICU) it is normal for you to feel helpless, and desperate to know everything you can about their recovery. The patient will need time to let their body rest and get over the shock of becoming so ill. Sometimes they will be given strong pain-killing drugs or sedatives to help the healing process begin. If you have questions about what is being done, ask the staff in the ICU. They will answer your questions as well as they can, but they will not want to give you false hope. The staff will be happy to explain what they are doing and they will be able to update you as time goes on.

Days may go by with no change in the patient’s condition. There may be nothing for you to do but sit by their bedside and wait. Nurses will often talk through what they are doing, even if the patient is unconscious. This is because, even though they are heavily sedated, the patient may be aware of being touched,

Talking to your relative or friend may also help. Keeping up a one-sided conversation can be difficult, but talking about shared experiences of holidays and good times can make you feel better too. You could also try reading a newspaper, magazine or book to them.

Even if the patient is conscious, you may find it hard to communicate with them. If they can’t speak, they may be able to write, or spell out words by pointing to some letters, numbers and common words you have written on a piece of paper.

Some relatives find it helpful to be more involved in caring for the patient when they’re recovering. You may be able to help by doing things such as brushing their teeth or massaging or moisturising their hands and feet. This will depend on how ill the patient is, and won’t always be possible. If you want to help in this way, please ask the staff.

Patients who are critically ill may have difficulty fighting infections and, because of with their underlying condition, this
can be very serious. The staff will do all they can to make sure the patient is protected. You can help too by washing your hands and using the anti-bacterial creams, gels or sprays you’ll see around the Unit before you go near or touch the patient. You should also ask other visitors to do the same.

If the patient has been given sedatives, these will be gradually reduced as the patient gets better. This process is called weaning. Depending on how ill they are, the drugs they needed, and how long they were sedated for, the weaning process can take hours or it can take days. During the weaning process the patient will be drowsy and confused, particularly in the early stages, but it’s a necessary step and it means they’re getting better.

Sometimes, the patient may behave out of character. This may be because of their illness or medication. They may be feeling agitated, confused, scared or paranoid. Paranoia is a form of anxiety or fear that can make you believe people are plotting against you or trying to hurt you. They may also have hallucinations (see things that aren’t really there) and nightmares that seem very real to them. Patients sometimes believe the staff are trying to hurt them. This can be extremely distressing for you and the patient but it will improve as they get better and begin to recover.

Sometimes patients in an ICU may have to be moved to an ICU in a different hospital. This could be because the patient needs specialist care that is not available locally or because beds are needed for new patients who are more seriously ill. This can be very upsetting for you and you may have to travel further to visit your friend or relative. You may only get a couple of hours’ notice of this happening. The Consultant in charge will contact you beforehand to discuss the reasons for the move and to answer any questions that you may have. Patients are only moved to a different hospital when it is absolutely necessary.
Remember to look after yourself:

You can help the patient by taking care of yourself. You shouldn’t feel guilty for not being by their bedside 24 hours a day. You need to give yourself a break and this will also give the patient time to rest. The patient will be very well cared for and the staff will contact you straight away if they need to or if there is any change in the patient’s condition.

Your family and friends will be concerned about you and the patient, and they will want to know how things are. You may appreciate their concern, but it can be tiring if the phone is ringing all the time when you’re at home between visits to the hospital. Passing on the information by e-mail or text message to several people at once can be easier. Or, you could speak to one person regularly and they could pass the information on to others.

You may not feel like eating and you may have difficulty sleeping, but do take time to eat regularly and rest when you can. If you become tired and ill, you won’t be able to care very well for the patient.
Visiting the Unit

All visitors are required to ring the bell and wait for someone to answer the intercom before entering the Unit. This is to maintain patient privacy and confidentiality. Delays may occur if the staff are busy, but please do not hesitate to ring again.

There is usually only room at the bedside for 2 visitors at a time. The nurse responsible for your relative or friend will advise you about what is practical at the time you visit.

There may be times that you will be asked to leave the Unit while examinations or procedures are carried out. These sometimes take a considerable length of time. This does not mean
that there is a problem. We will explain, where possible, what is happening. Please do not hesitate to ask any questions which you may have.

It is not always advisable to bring babies and young children into the Unit. Children may visit but please discuss this with the nurse first.

Please SWITCH OFF mobile phones BEFORE COMING into the Unit as they interfere with the equipment being used.

Telephone Numbers

01865 235078 or 01865 235077

We understand that friends and relatives will want to telephone the Unit to find out how the patient is doing. To help us care for your relative or friend as well as we can we ask that families designate one or two people only to telephone the Unit and then pass the information on to other people. This allows the nurses to spend as much time as possible at the patient’s bedside.

All patients have a right to confidentiality; therefore the amount of information we can give over the telephone is restricted. Family members at the bedside will probably be asked to deal with enquiries from friends.

Accommodation

The Unit has no formal overnight room for relatives to use. However we do have access to overnight accommodation on the Churchill site if it is required in unforeseen circumstances. The use of a room would be reviewed on a daily basis.

We have a list of Bed and Breakfast accommodation available locally. Please ask the nurse in charge for the information
Parking and travelling

24 hour “Pay on foot” car parks as are located in the hospital grounds. Free permits can be issued to close friends and relatives up to a maximum of two per family, while the patient is in CICU.

The hospital is on a regular bus route with buses running regularly between the hospital and the town centre and Park and Ride centres on the outskirts of the City. A selection of timetables can be found downstairs at the Colin Bowler reception desk on Level 0 of this building.

Patients’ personal belongings and needs

Towels, clothing, nightwear and valuables are not needed on CICU, but personal toiletries such as a soft toothbrush, comb or brush and shaving equipment are much appreciated.

No fresh flowers are allowed on the Unit due to infection risk, but cards and photographs are always welcome and will be displayed in the limited space available.

Smoking

The Churchill Hospital operates a No Smoking policy.

Security

There are security cameras in operation throughout the hospital, and patrols of the hospital grounds and car parks are carried out day and night.
About the Churchill Hospital

The Churchill Hospital is a centre for Cancer Services and other specialities including Renal Services and Transplant, Clinical and Medical Oncology, Dermatology, Haemophilia, Infectious Diseases, Chest Medicine, Medical Genetics and Palliative Care.
Facilities within the Churchill Hospital

**Restaurants**
Re-Treat Restaurant is located in the original hospital building. Opening hours are:
Monday - Sunday 7am - 7pm

Breakfast is served between 7am and 11am
Lunch is served between 12 pm and 2.30 pm
Hot snacks are served between 3.30pm and 7pm

Java City Coffee Bar is located in the original hospital building beside the Re-Treat Restaurant. Opening hours are:
Monday - Friday 8am - 3pm

Café Nuovo is located on Level O of this building beside the reception area. Opening hours are:
Monday - Friday 7am - 6.30 pm
Saturday 10am - 5pm
Sunday 10am - 1pm

Vending machines are available 24 hours a day next to the restaurant.

There is also a League of Friends tea bar on Level 1. Opening hours are:
Monday – Friday 10am to 3.30pm

**Toilets are located in the Relatives Waiting Room next to CICU**
There are also toilets on Level 0 near the Lifts and Reception Desk.
Public Telephones
A payphone is located in the Relatives Waiting Area and also on Level O in the Reception Area.

Please do not ask relatives or friends to contact you on the CICU telephones as access to these is needed at all times.

W H Smith (Newsagent)
This is located on Level O of this building. Opening hours are:
Monday – Friday 7am - 6.30pm
Saturday 10am - 5pm
Sunday 10am - 1pm

There is a greater selection of shops, banks and building societies located in Headington, which is a 10-15 minute walk away from the hospital. A map of the area is included in this booklet.

Chapel
There is a chapel, signposted within the original hospital building, which is open 24 hours. There is also an all faith room, signposted from the main reception of this building. If you would like us to contact one of the hospital chaplains for you, please do not hesitate to ask.

Patient Advice and Liaison Service
This is independent and confidential service for the patients, relatives and carers.

Tel: 01865 221473. (PALS for the Churchill site is being managed from the John Radcliffe Hospital at present.)
Further information and support

Listed below are names and telephone numbers of various outside support agencies. If you would like telephone numbers or contact details of any other agencies, please ask your nurse.

Oxford Social Services: 01865 815538
Citizens Advice Bureau: 01865 247578
Samaritans: 01865 722122
Family Health Services Authority: 01865 741174
(Information about GP’s, Opticians, Dentists, Pharmacists)

ICU steps – support for ICU patients and their relatives at www.icusteps.com
Help with English

If you need help understanding or speaking English we will do our best to provide an interpreter. The hospital has access to an Interpretation Service. This can be for over the telephone conversations, face to face meetings or an interpretation service for the deaf. Face to face meetings and help for the deaf community do need to be arranged in advance so let us know as early as possible and we will do our best to help. Please ask the nurse by the bedside and we can try to make the necessary arrangements.
This booklet has been devised and written by the nursing staff of the CICU of the Churchill Hospital. We would like to acknowledge some content from ICU steps literature, a charity that supports ICU patients. Thank you.
If you need an interpreter or need a document in another language, large print, Braille or audio version, please call **01865 221473** or email **PALSJR@orh.nhs.uk**

---

Melissa Lovell, Senior Sister, AICU, Carolyn Soanes, Senior Sister, CICU, Simon Fletcher, Senior Staff Nurse, AICU and Gill Warlington, Ward Clerk, CICU

Version 1, April 2010
Review, April 2013
Oxford Radcliffe Hospitals NHS Trust
Oxford OX3 9DU
www.oxfordradcliffe.nhs.uk

OMI 1845