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- History (our background)
- Health Foundation (Grant) 2 year project funded
- GRI Parent site

• 4 roll out sites

- Criteria for participation
- Team members (evolving)
- Cardiac Rehab with a twist!!!
- Format of programme
- QI evaluation (every week)

What we have learned...

- Transition from ICU to HDU/Ward and further downstream a big stressor (patient and family)
- Discharge planning needs to start on admission
- Peer support (hugely underestimated)
- Cognitive impairment evident

What we have learned (cont) ...

- Stress thermometer/ Concerns checklist
- R shoulder pain an issue ? Why
- Goal setting / motivation (WMTY)
- 3rd sector involvement (huge learning curve)
- Resilience of team members



Abandoned, fearful, anxious, wished I'd been told what to expect, learning to walk again, looking into a mirror for the first time Abandoned, financial strain, frustration, employer expectations, no primary care involvement, difficulty applying for blue badge, relationship strain, overprotective relative



Critical Care

Ward Care

Home/ primary Care

- 1. Debrief patient/family prior to d/c from ICU
- 2. Concerns checklist
- 3. Stress thermometer
- 4. Rehab prescription with MDT
- 5. Caregiver /family needs

- 1. Continued contact
- 2. Rehab monitoring
- 3. Concerns checklist
- 4. Stress thermometer
- 5. Caregiver/family needs

- 1. Peer Support Group
- 2. InS:PIRE
- 3. Primary care interface
- 4. Link person
- 5. Third sector prescription
- 6. Concerns checklist
- 7. Stress thermometer



For the future...

- Survey of HDU staff
- Discharge process (evaluation) and change in practice
- Ward follow up for patients from ICU staff
- Hospital Links practitioners/ Community Links practitioners
- NHS funding...???

Funding for the future!



LEJOG 2017 Success! InS:PIRING

INS:PIRE OODOOO Patient Story by Judith Martin On 16 December 2015, I was fit, healthy and getting organised Con-to-December 2015; Lwas fit, healthy and getting organised for Christmas, Lwas looking forward to the year ahead: a year of cycling, running, tennis, hockey and becoming a gran. The next day I was admitted to the Emergency Department at The next way i was autilities to the changes y separation of University Hospital Crosshouse (UHC) in severe pain. It wasn't University mospher conscious to the provide the second sec In those eleven days, unknown to me, I had multi-organ failure and four operations, and my friends and family experienced a nightmarish festive period. Theld on by my fingertips, wred to life support, in the hands of the skilled, caring staff at the hospital. I had been in a very dark tunnel, but my fighting spirit had brought me to the faint glimmer of light at the end of it. I had been struck with sepsis. Cycle the 1600km Lands End to John O'Groats in the s Sepsis is the acute bodily reaction to infection. Symptoms initially present as flu like, but can rapidly deteriorate into a life Complete a Half Ironman distance Triathlon in 2018, Issue threatening condition. Sepsis accounts for 44,000 deaths every 1.9km, cycle 90km and run 21km) year in the UK - that's more than breast cancer, bowel cancer, and prostate cancer put together.* The infection can come from anywhere - even a contaminated body too hard, so she was reassured by the staff at the sessors that the right help would be given to me to decide on and cut or insect bite. Normally, your immune system kicks in to fight

the infection and stop it spreading but if the infection manages to spread quickly round the body, then the immune system will launch a massive immune response to fight it. This can also be a problem as the immune response can have catastrophic effects on the body, leading to septic shock, organ failure and even death.

After three more operations and excellent care and attention from the hospital staff, I count myself as one of the lucky ones. I made it back from the brink and was out of the hospital door, pretty much all in one piece, but not entirely sure what had happened and with a long road to recovery ahead, to get back to my previous level of health and fitness. I had a final operation

and my nephew's wife Amanda keeping me company The second challenge is now organised and training is under way. My husband Allan, and I set off on Sunday 2 July from Land's End and will reach John O'Groats on Saturday 15 July. It was suggested that to help with recovery, we should take up something new or do some voluntary work. With this in mind we have decided to use this challenge to raise money for the UK Sepsis Trust to help raise awareness of sepsis and the consequences of not recognising it and treating it gacey

I am now looking forward to out InsPIRE groups one year ersary meeting in May, where we will meet up and docum

nhsggc.org.uk/inspire



@inspireICU



Questions?



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