

Critical care rehabilitation

Susie Chrystal BACCN Study day November 2019



Queen Elizabeth Hospital, Gateshead

4,200 staff600 hospital beds across GatesheadCommunity services throughout the borough

Critical care

6 level 2 beds and 6 level 3 beds Surgical and medical patients









Critical care rehabilitation guided by...

NICE guideline 'Rehabilitation after critical illness in adults' CG83 2009

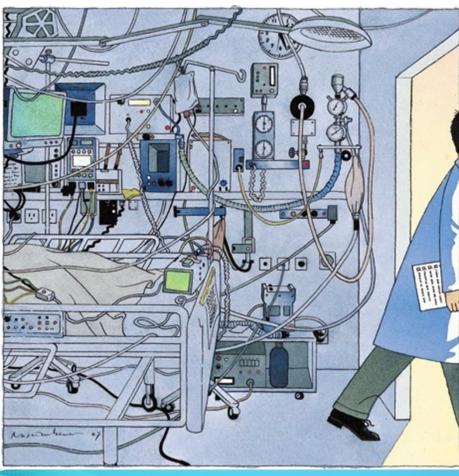
NICE quality standard 'Rehabilitation after critical illness in adults' QS158 2017

GPICS 2019 chapters on rehabilitation, psychology, OT, physiotherapy

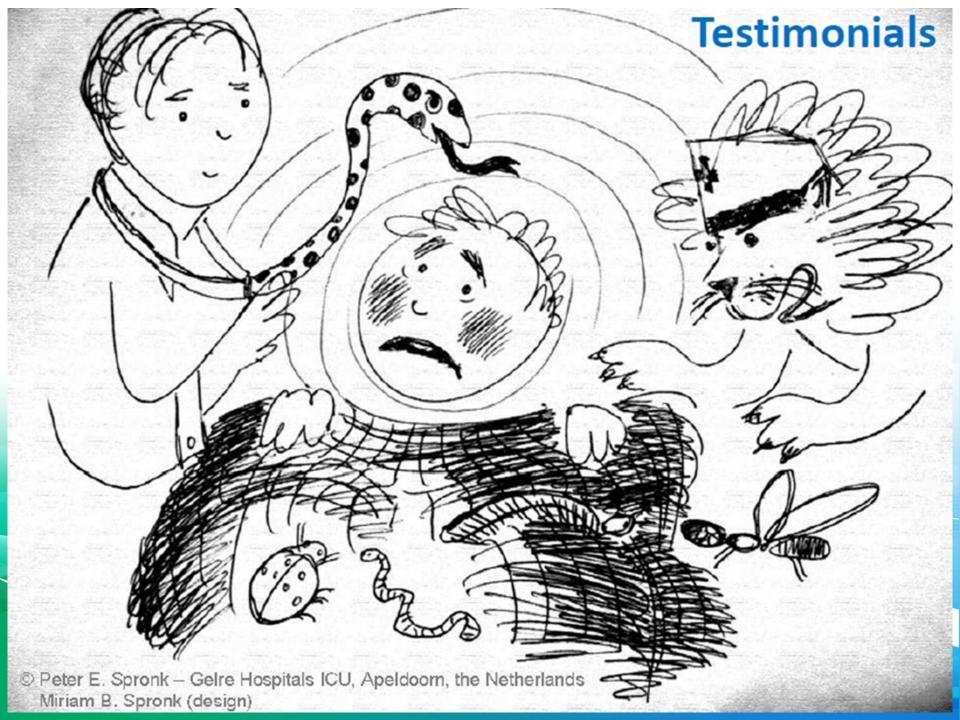
Also guided by patient experience...













Growing understanding of the effects of critical illness

Persistent functional disability demonstrated over 1 year following discharge in ARDS patients

Herridge et al 2003

Prolonged ventilation in critical care is associated with impaired health related quality of life up to 3 years after discharge, even when patients are living independently at home

Combes et al 2003





Survival is not enough

'The large investments made during intensive care are only sustained when continued support is in place following discharge'

Critical Care Service Specification 2015

*'There is more to life than measuring death'*Kings Fund report 1989



Traffic light system



GOLD standard pathway

MEDIUM Intensity Tailored to individual patient needs

LOW Intensity Standard ward based physiotherapy

All patients categorised into one of 3 pathways on discharge from critical care



ritical Care

Twice daily physiotherapy

Early mobilisation

Individualised exercise programme

Photo diary

Nurse practitioner assessment & support

Rehabilitation manual

Base ward

Twice daily input from rehabilitation assistant

Nurse practitioner assessment & support

Physiotherapy as necessary

Early input from OT

After Hospital discharge

Telephone follow up at

2, 4 & 6 weeks

OT support

MDT follow up clinic at

8 weeks

Invite to ICUsteps

Exercise group

For patients intubated 72 hours or more



Making sense of what has happened...

Rehabilitation manual

Discharge summaries

Diaries

Discussion with family and health care professionals

Visits back to critical care

Screening for depression/anxiety/PTSD

Follow up clinic





Rehabilitation on base wards

Functional goals

Physio led goals

Mood lifting activities

Collaboration with the MDT

Liaison with families





Continuing support in the community

Signposting to other agencies/groups eg exercise groups

Follow up phone calls

ICUsteps Gateshead – patient led support group

Visits back to critical care

Screening for depression/anxiety/PTSD

Follow up clinic

Exercise group





'Humanising' critical care

Trips out

Therapeutic activities & beauty box

Ex patient volunteer

Music in Hospitals visits

Adapting to individuals

Learning from patient stories







Celebration Christmas dinner 2018



Recognised as an area of outstanding practice by CQC

The Rehabilitation after Critical Illness Team (RaCI) led by nurses, health care assistants and physiotherapists had developed new pathways to help patients recover from critical illness. The team provide rehabilitation while a patient was in the critical care unit, throughout their stay and following discharge.



CQC Report (2016)



Evaluation of critical care rehabilitation service

9 day difference in LOS post discharge from critic

Proven cost effectiveness

ICER (Incremental cost effectiveness ratio) = £60

(No GOLD 2007-2009 vs GOLD 2010-2012)



Further inspiration

#rehablegend @TantumKate

#ICURehab @DrDaleNeedham

#ICURecovery19 @NydahlPeter

