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The Royal Liverpool
and Broadgreen
University Hospitals
NHS Trust

Patient information

Rehabilitation In the Critical Care Unit: A guide for patients, their families and friends

Therapies Speciality

This leaflet introduces different members of the rehabilitation team who work on Critical Care and who will assist you with recovering from your critical illness. They might work directly with you and also liaise with and support your family and friends whilst you are unwell. The rehabilitation team meet as a group twice a week to review goals and set new ones in order to help you recover from your critical illness.

Physiotherapy

Physiotherapists have two key roles:

- Helping with 'lung health' while you are in Critical Care. This might be while you have a ventilator to support your breathing or after the ventilator has been removed and you are breathing on your own again.
- Promoting early physical activity. We will help you to perform simple exercises while you are in bed and then when you are stronger, help you to get out of bed and start moving about more. Physiotherapists will often work alongside Occupational Therapists to achieve this.

A physiotherapist will assess you within 24 hours of admission to intensive care and will decide your individual needs and goals. This will lead to a personalised treatment plan which you should be involved in deciding when you are able to.

Possible changes in body/function

It is common for there to be changes to your body/function which may include:

- You may be very weak and might find it difficult to walk – this will get better with time.
- You may become more breathless or fatigued than before.
- You may experience some pain.
- Sometimes your joints will be stiff because you have not been moving as much as usual. These too should improve with time.

For individual exercise plans, please speak to your physiotherapist.

Occupational Therapy

Occupational Therapists help people who are or have been critically ill, to improve their ability to take part in and carry out every day activities that are meaningful and important to them.

Occupational Therapists take a person centred approach involving you, your relatives and carers in assessment, setting achievable goals and treatment plans, and helping to make informed decisions about the future.

Our role:

- Helping you to deal with the psychological impact of being critically ill through coping strategies, anxiety management and relaxation techniques.
- Assessing for and treating any cognitive problems: which may include changes with memory and concentration.
- Assessment of movement in your arms and legs and preventing weakness and loss of movement through stretches, positioning and at times use of splints
- Practicing personal care activities such as getting washed and dressed.
- Providing advice on energy conservation and fatigue management techniques and strategies.
- Helping you to take part in activities that are important to you
- Assessment and provision of appropriate seating to enable you to sit out in a chair

Speech and Language Therapy

Speech and Language Therapists work with people who are critically ill and have difficulties with swallowing and communication.

Swallowing difficulties (also known as 'dysphagia')

Swallowing difficulties may be caused by:

- An illness that directly affects the nerves or muscles involved in swallowing e.g. stroke, brain injury.
- Trauma or weakness following intubation (insertion of tubes to support breathing).
- General weakness and fatigue of the muscles that are used in swallowing.

Speech and Language Therapists assess swallowing using different types of food and drink. They may also use a camera test (called a Fibre-optic Endoscopic Evaluation of Swallowing FEES) or an X-ray (called a fluoroscopy). They may suggest swallowing exercises or techniques to help and will work with other members of the team to promote independence with eating and drinking.

Communication difficulties

Speech and Language Therapists can assist in supporting your communication when you are critically unwell. Some of the medication used for sedation, the presence of a breathing tube in the mouth or throat or being very tired can all affect communication. Speech and Language Therapists may provide communication charts or suggest exercises or strategies to help.

The Critical Care Team tailor care specifically around the person who is critically unwell. We use a form called 'This Is Me' to understand more about you, what you like to be called, your likes/dislikes and how you prefer to be communicated with.

Dietetics

The Dietitian will visit the Intensive Care Unit regularly to review your nutritional needs. They will discuss this with the doctors and nursing staff, to make sure that you are getting enough nutrition to support your recovery.

Our role:

- Provide adequate nutrition which has been tailored to meet your individual requirements, depending on your medical condition, nutrition status, age and gender.
- Liaise with medical staff regarding the most appropriate route for delivering nutrition which can be provided either through oral intake, tube feeding or by intravenous feeding.
- To help monitor if you are getting enough nutrition while you are unwell, regular measurements including weight, mid-upper arm circumference and skinfold thickness will be carried out.

Enteral (tube) feeding

If it is not possible to meet nutritional requirements through eating and drinking, a feeding tube may be placed. The most common feeding tube used in Critical Care is a naso-gastric tube (a tube placed via the nose directly into the stomach) however on occasion a nasojejunal tube (a tube placed via the nose into the small bowel) may be needed. The type of feed (nutrition given via the feeding tube) will depend on your individual needs and medical background.

Parenteral nutrition

If tube feeding is not possible parenteral nutrition (a type of liquid food given directly into the bloodstream) can be considered to provide you with the nutrition that you require. For further information about specific nutrition, please speak to the dietitian.

Feedback

Your feedback is important to us and helps us influence care in the future.

Following your discharge from hospital or attendance at your outpatient appointment you will receive a text asking if you would recommend our service to others.

Please take the time to text back, you will not be charged for the text and can opt out at any point. Your co-operation is greatly appreciated.

Further Information:

Royal Liverpool Hospital

Intensive Care Unit

Tel: 0151 706 2400

Text phone Number: 18001 0151 706 2400

High Dependency Unit

Tel: 0151 706 2386

Text phone number: 18001 0151 706 2386

ICU Steps: the intensive care patient support charity. There are two local ICU support groups (Chester and Whiston areas). See website for contact details and further information

www.icusteps.org

Tel: 0300 30 20 121

ICU Delirium: a website with specific information for patients and families on delirium (a severe state of confusion that can occur after critical illness).

www.icudelirium.org

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All Trust approved information is available on request in alternative formats, including other languages, easy read, large print, audio, Braille, moon and electronically.

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در صورت تمایل می‌توانید کلیه اطلاعات تصویب شده توسط اتحادیه در رابطه با بیماران را به اشکال مختلف در دسترس داشته باشید، از جمله به زبانهای دیگر، به زبان ساده، چاپ درشت، صوت، خط مخصوص کوران، مون و بصورت روی خطی موجود است.

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