St James’s Hospital

General Intensive Care and High Dependency Units

Information for patients and relatives
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INTRODUCTION

A patient may be in ICU/HDU because of an accident, an illness or for treatment after a major operation. This can be a worrying time for patients, their relatives and friends. Seeing the patient for the first time can at times be distressing. They are likely to be connected to a number of machines and drips and will often look very different from how they normally look.

This booklet has been developed by the ICU/HDU nurses, who recognise the importance of written information to help families through this challenging journey. It is hoped it will support the dialogue between you and the ICU/HDU team who are involved in the delivery of your relatives care. If you require additional information, please do not hesitate to approach any member of the nursing or medical team.
THE FUNCTION OF THE UNITS

ICU and HDU provide care for critically ill patients with potentially reversible conditions. Patients benefit from intensive monitoring with close observation to complex care involving diagnostic examinations, organ support and treatment.

a) The General Intensive Care Unit (ICU)

The ICU is a 19 bedded unit. Patients are cared for in either an open plan ward or isolation rooms. The nurse-patient ratio is usually one nurse to one patient.

Patients in ICU may be critically ill and require close monitoring and/or specific therapies. Typically ICU patients require support for multiple organs such as the heart, lungs, kidney’s with medications and specialist equipment e.g. ventilators (breathing support) or dialysis (kidney support).

b) The High Dependency Unit (HDU)

The HDU (Bennets) has 4 beds and HDU (Duns) has 3 beds, each in open plan wards.

The HDU is a less intensive setting compared to the ICU. Many ICU patients will move to HDU when their condition is improving. Typically HDU patients require less support and the nurse-patient ratio is usually one nurse to two patients.
c) The Patients Bed Space:

The bed space consists of an electric bed, specialist mattress/bed, pumps, monitors and various machines.

Every patient is placed on a heart monitor which displays a read out at the bed-side monitor. This monitor continuously displays information such as the heart rate, blood pressure and oxygen levels for patient safety and to help guide our treatment. Infusion and feeding pumps are usually present as patients receive intravenous (IV) medication, fluids or feeding through lines and tubes and may also have various drainage tubes inserted.

Some patients may be placed on a machine called a ventilator to support breathing. Patients may find it difficult to communicate either due to sedation or pain control medication, or from the placement of a breathing tube.

Each bed space also has a computer used to record the patient’s medical and nursing records.
HOW LONG DO PATIENTS STAY IN ICU/HDU:

The time patients spend in ICU/HDU will vary depending on their reason for admission, condition and progress. The team continuously re-assesses each patient's needs and will update you and your family regularly.

If you wish to meet with the ICU/HDU Consultant or Primary Consultant please make request this through the nurse allocated to your relatives care.
THE ICU/HDU TEAM MEMBERS:

The ICU & HDU departments are run jointly with a range of healthcare professionals involved.

- A medical director with a team of consultants in Anaesthesia & Intensive Care Medicine who manage the care of the patients with a team of doctors in consultation with the primary (admitting) consultant.

- Directorate Nurse Manager & Clinical Nurse Manager 3 (CNM 3) who assumes overall responsibility for the executive nursing management of the units.

- Clinical Nurse Managers (CNM). Co-ordinate admissions and patient care. At least one CNM is present on each shift.

- Staff Nurses; ICU trained nurses assess, monitor and provide all specialist nursing care in both ICU and HDU.

- Other members of the interdisciplinary team include: A ward clerk, critical care assistants, janitors, radiographers, physiotherapists, speech & language therapists, occupational therapists, pharmacist and clinical nutritionist, medical engineers, information technology, logistics, laboratory, technical services staff, social workers, chaplaincy etc.

You may identify staff as follows:

<table>
<thead>
<tr>
<th>Position</th>
<th>Uniform</th>
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</thead>
<tbody>
<tr>
<td>Clinical Nurse Manager (CNM)</td>
<td>Royal Blue/Navy piping</td>
</tr>
<tr>
<td>ICU Nurse Education Facilitators</td>
<td>White/Purple piping</td>
</tr>
<tr>
<td>Staff Nurses</td>
<td>Light Blue/Navy Piping</td>
</tr>
<tr>
<td>Critical Care Assistants</td>
<td>Grey</td>
</tr>
<tr>
<td>Physiotherapists</td>
<td>White/Navy piping</td>
</tr>
<tr>
<td>Speech &amp; Language Therapist</td>
<td>White/Red Piping</td>
</tr>
<tr>
<td>Occupational Therapist</td>
<td>White/Green piping</td>
</tr>
<tr>
<td>Anaesthetic/ICU Medical Team</td>
<td>Green Theatre Scrubs</td>
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PATIENT INFORMATION AND CONFIDENTIALITY

The ICU/HDU can be dynamic environments with rapidly changing patient conditions and we endeavour to provide timely information on the patient's status. You may phone the units at any time for an update on the condition of your relative. It is helpful to delegate a single family spokesperson who will make the call and pass information onto others to avoid multiple phone calls and increase the time for care of your relative. We respectfully ask relatives to avoid calling at the nurse handover times i.e. 7.30-8am and 7.30-8pm if possible.

For patient privacy and confidentiality reasons only brief information and status updates will be given over the telephone.

To protect patients’ privacy and confidentiality the use of any photography or video equipment within the hospital is not permitted without prior agreement with a CNM on duty and the consent of the patient.
TELEPHONE NUMBERS & LOCATION OF THE UNITS

Intensive Care (ICU) – 01 416 2561 /2562.
Ask a staff member for the direct access number if in an isolation room.
ICU is situated on the first floor past the operating theatres.

High Dependency (HDU) (Bennett) 01 416 2345/2346.
Situated on the 1st floor just inside the entrance to Edward Halloran Bennett Ward.

High Dependency (HDU) (Duns) – 01 416 2012/01 428 4042
Situated on the 1st floor at the entrance to Sir Patrick Duns Ward

VISITING

VISITING YOUR RELATIVE

Do not visit if you are ill or have an infection e.g. cold, flu, diarrhoea, vomiting.
If unsure please discuss with the CNM.
Please adhere to visiting times:

2pm - 3pm
6pm - 7pm

The CNM can use their discretion in relation to accommodating specific visiting requests outside these hours.

Please ring the bell situated at the entrance to ICU or HDU before entering the units out of respect for patients privacy and your safety.
You may use the hospital phone situated in the ICU visitors waiting area to ring the units if you do not get a response from the bell.
We strive to maximise the time you have with your relative by planning care around visiting times. However when unavoidable, you may be asked to wait if a patient is undergoing an intervention. We ask for your patience as your relatives care and welfare is always our first priority.

Please remember

- Only next of kin and/or immediate significant others should visit.
- Two persons only may visit the bed space at any one time.
- Children should not visit unless prearranged in advance with the Clinical Nurse Manager (CNM).
- Turn off your mobile phone before entering the units. Due to potential electrical inference risk with sensitive medical equipment.

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**What can you do when visiting?**

The presence of family and close friends is a very important part of caring for each patient. It helps us to learn more about the patient when they are unable to communicate directly to us. The familiar faces, voices and comforting touch are important positive factors which can aid recovery.

When a patient is unconscious or on heavy sedation, nurses and doctors talk to them and explain what they are doing. This is because the patient may be aware of being touched, or may hear conversation but they are unlikely to remember things as clearly as they would when fully conscious. Sometimes even if the patient is conscious, communication may be difficult. They may be able to write, or spell out words by pointing to letters, numbers and common words on a piece of paper if they cannot speak.
Helping the patient:

We encourage you to talk to your relative too when you visit although there are exceptions e.g. in case of a brain trauma. Keeping up a one-sided conversation can be difficult. Therefore talking about shared experiences, family life, holidays and good times can make you both feel better. You could also try reading a newspaper, magazine or book to them. Days may go by with little obvious progress and sometimes set-backs. This is frequently the course of a critical illness and is not necessarily a poor sign, recovery takes time. Sometimes there may be nothing for you to do but sit by their bedside and wait.

There may be some patients personal belongings which can help them recover or feel better, such as their glasses, hearing aids, dentures, toiletries, slippers, pictures, or music. Generally in ICU & HDU patients wear hospital gowns due to the presence of lines and tubes. When moving to the ward area patients may appreciate having their own nightwear.

Helping the staff:

Some relative’s find it helpful to be more involved in caring for the patient when they are recovering. You may be able to help by doing things such as brushing their hair, massaging or moisturising their hands and feet, or assisting with eating and drinking. This will depend on how the patient is, and will not always be possible but if you want to help in this way, please ask the nurse.

Helping yourself:

You can help the patient by taking care of yourself. You must maintain regular pattern of meals and sleep. You should not feel guilty for not staying in the hospital. You need to rest and this will also give the patient time to rest. The patient will be very well cared for and we will contact you without hesitation if we need you or if there is any significant change in condition. Often you will need your energy for the period after ICU & HDU when the patient is more communicative and active.
Children visiting:
You should check with the clinical nurse manager before bringing children to the unit. If the child decides they want to go into the ICU, staff will prepare them for what they might see, including the machines, what they do and how the patient might look. What you can tell the child will depend on their age and why their parent or relative was taken into the ICU.

Security and Safety Information for Visitors:
• Do not leave personal belongings unattended.
• Do not leave items of value in your car.
• Ensure that your car is locked / alarmed.
• Take note of fire notices & general instructions displayed in the hospital
• Be aware of your surroundings and personal safety on the grounds.
• Security: 01-4162107

INFECTION PREVENTION

INFECTION PREVENTION AND CONTROL
Patients who are critically ill may have difficulty fighting infections and, because of how ill they are to begin with, this can be very serious. The staff will do all they can to make sure the patient is protected.

St James’s Hospital and the ICU/HDU are committed to reducing the spread of infection. The single most important thing that you can do to help reduce infection is to wash your hands carefully before you go near or touch the patient using the anti-bacterial creams, gels or sprays you will see around the units. You can also ask all other visitors to do the same.
Please also note to reduce infection risks:

- Do not use patients or staff toilets.
- Do not sit on or place your feet on the bed.
- Do not bring in any food items for patients unless authorized by the CNM.
- Flowers or plants are not permitted.
- Electric or battery operated fans are not permitted.

In the event that the Hospital is experiencing an infection outbreak, a “No Visiting Order” may be issued. Only essential visiting pre-arranged with the CNM will be authorised during this time.

**ADVICE**

**SUGGESTIONS AND ADVICE**

- If you need information or advice please speak with the nurse at the bedside or the nurse manager. You can also ask for a meeting with the ICU doctors or primary medical/surgical team.
- Write down any questions, ideas, information or comments you may have before your visit.
- Leave some contact numbers for family members/next of kin.
- If you are unsure whether you should stay in the hospital or leave please ask the nursing/medical team for advice.
- An interpreter service is available for non-English speaking patients & families.
- A social work service is available for patients and families to assist with anything from financial concerns, substance abuse, stress and bereavement counselling.
AFTER DISCHARGE FROM ICU/HDU

When the patient is considered ready for discharge from ICU, they may be moved to the HDU or directly to a ward.

Many patients remember little, if anything about their stay in ICU/HDU due to their illness and should not be concerned about this. They may be weak or need assistance with basic care initially. They also may have some tubes and drains remaining for a period of time. The nurses, physiotherapists and doctors on the ward will help to regain the patient’s independence and strength. You can help by encouraging and promoting independence.

The nature of the illness and duration of the stay in ICU/HDU will impact on the length of the recovery time. The time to return to normal activities such as work and family life is different for every patient, this depends on the patient’s general health, motivation, support and the encouragement and support of family and friends.

Before the patient leaves the hospital they may like to visit us in ICU/HDU especially if there is difficulty in remembering the stay. We may be able to update you on what happened during that period and we always welcome seeing our patients recovery!
If the patient does not survive:
Sadly, despite the best efforts of medical and nursing staff, sometimes patients are too ill and do not survive. In human terms the impact of this can be immense for relatives and staff. St James’s Hospital is part of the ‘Hospice Friendly Hospitals’ programme which aims to enhance the provision of end of life care in hospital. Chaplaincy service is available providing spiritual support for Roman Catholic, Church of Ireland and other faiths as requested. For further information: hospicefoundation.ie

Organ Donation:
A person dies when their heart stops beating or in some cases if they are brain stem dead. If the doctors believe the patient is brain stem dead, a set of tests must follow to confirm this. In this situation organ donation may be possible and the next of kin and family members may be approached to discuss this. Knowing the patient’s wishes regarding organ donation can help in making the right decision for your family. Most families who agree to donate one or more of the patient’s organs find it comforting that something good will come from their loss.

Post Mortem:
Sometimes a hospital post mortem or a coroners post mortem may be requested. If this is the case the staff will discuss further with you and give you written information. It may help you to talk to a social worker/bereavement counsellor at this difficult time who can offer support and understanding for both adults and children. See the ‘Useful contacts’ section or ask a staff member for advice.

PERSONAL PROPERTY

Please note that St James Hospital accepts no responsibility for the loss of or damage to personal property of any kind, including money, in whatever way the loss or damage may occur unless the property has been handed in to the provider for safe custody and an official receipt has been obtained.
Valuables:

- Any valuables on admission are given to a delegated family member for safe keeping.
- If the patient is unaccompanied on admission valuables are sent to the Security Department for safe keeping and can only be obtained by the patient in person.

COMPLAINTS

IF YOU ARE UNHAPPY WITH THE CARE BEING GIVEN TO A PATIENT

The staff do all they can to keep patients and relatives informed about what treatment is given and why. If there is anything you do not understand or want to know more about, ask the staff.

If you are unhappy with the care or information being given and you are not able to deal with this locally through the ICU/HDU staff, you can contact the Hospital Complaints Officer who will help you to find the answers you need.

Be assured that we aim to provide the highest quality patient centred care with highly qualified and committed staff. If you wish to comment on your hospital experience you are invited in the first instance to approach either the Clinical Nurse Manager and ICU Consultant team.

If you are dissatisfied or consider the complaint to be very serious, the matter should be addressed directly to:

Hospital Complaints Officer,

Freepost,

St James's Hospital,

PO Box 580

Dublin 8

Tel.: 01 410 3361.
FUNDRAISING

DONATIONS AND FUNDRAISING FOR THE ICU/HDU OR ST. JAMES’S HOSPITAL

St. James’s Hospital always needs finance over and above that provided by government to enhance the facilities and the service for patients and their families. Private donations and fundraising are therefore deeply appreciated. If you would like to make a donation or fundraise for our unit, or for the hospital in general, please contact the St. James's Hospital Foundation Office on 01 428 4086 or email foundation@stjames.ie and our colleagues will be glad to help you. You may specify funds for use within the ICU/HDU or for a specific personal request.

USEFUL CONTACTS

USEFUL CONTACTS

St James's Hospital
James’s Street, Dublin 8. General Enquires (01) 410 3000
Further information is available on the hospital website: www.stjames.ie

Citizens Information
This organisation provides information on public services and entitlements in Ireland. They also provide information on organisations providing bereavement support and counselling
Contact: 1890 777 121
Website: www.citizensinformation.ie

Samaritans
Samaritans provides confidential unbiased emotional support, 24 hours a day, for people who feel distressed, desperate or suicidal.
Helpline: 116 123
Website: www.samaritans.org
The ICU/HDU waiting area has some seating, vending machines and a public toilet.

**Shops & Facilities:** There are a range of shops, restaurants, pharmacy and bank situated at the main hospital concourse entrance.

**Convenience Store:** Monday-Sunday: 7am-9pm. There are also Convenience stores on the street entrances at James's Street and Rialto.

**Gift Shop:** Monday- Sunday: 10am - 8pm.

**Pharmacy:** Monday – Friday: 8.30 am- 8pm, Saturday: 10am-6pm. Sunday: 11am-6 pm.

**Restaurant:** Monday – Friday: 8am -4 pm.

**Sandwich Bar:** Monday – Friday: 10am-8 pm, Saturday & Sunday: 12pm-5pm.

**Coffee Shop:** Monday – Friday: 7.30am-8 pm, Saturday & Sunday 9.30am -7.30pm.

**Juice Bar:** Monday – Friday: 10am-8.30 pm.

**Bank of Ireland:** Monday – Friday: 10am- 4pm.

ATM machines: (two on site) at Concourse Reception and convenience store.

**Public Toilets:** Located beside Concourse Reception.

**Catholic Church:** Mass Times: Monday – Friday 8.30am

**Quiet Room:** An area for peace, quiet and relaxation for patients, visitors and staff. Situated off the concourse on the ground floor. Ask the hospital receptionist for access.

**Interfaith Chapel:** Located beside the concourse

**Postal Services:**

There is a postal service centre machine located inside the main entrance to the Concourse. Stamps can be purchased from this or in the convenience store.

**Wifi:** Free public access Wifi is available in several locations and on the concourse. No password required.
GETTING THERE

TRAVELLING TO AND FROM ST JAMES HOSPITAL

Bicycle: There are 3 Dublin bikes terminal stations distributed throughout the Hospital grounds to enable easy access and optimal use.

Website: www.dublinbikes.ie

Car Parking: Underground parking opposite main hospital. Charges apply. Remember to pay for parking in the entrance hall or car park before returning to your car. For more information on parking at St James Hospital please check: www.stjames.ie/Visitors/Gettinghere/Parkingfacilities/

Taxi Service: Taxi rank pickup area - outside Main Hospital Concourse Entrance. A Courtesy Taxi Phone is located beside the concourse reception desk.

Dublin Bus Service: Dublin Bus Stop in hospital grounds – Number 123 from Walkinstown to Marino via city centre.
Buses 13 and 40 pass on St. James’s Street.
For more information see dublinbus.ie

LUAS Terminal: The LUAS tram Red Line is beside the James’s Street entrance. Serves Heuston Station, City centre and Connolly Station & southbound to Tallaght via Red Cow/Naas road.
See http://www.luas.ie/interactive-map.html

Accommodation: A list of local B&B, hotel accommodation is available on request from ICU/HDU staff.
We would like to thank everyone who contributed to this booklet and everyone who gave their time and expertise to make it possible. A special thanks to the nursing staff in ICU/HDU for their contribution and suggestions in completing this booklet and to the Medical Illustration Unit for photos and layout.

For up to date information on St James Hospital see: stjames.ie/Visitors
THIS IS A SMOKE AND VAPE FREE HOSPITAL

Thank you for not smoking