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For physicians, nurses, and other allied healthcare professionals

Kingston Hospital 
NHS Foundation Trust

Development of a critical care rehabilitation clinic at a district general hospital

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Introduction

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- **National Institute of Clinical Excellence (NICE) guidelines CG83.**
 - > Patients with rehab needs 2-3 months after critical care discharge should be reviewed by appropriately skilled healthcare professional(s)
 - > Patients should be referred to appropriate rehabilitation or specialist services
 - > Patients should be reviewed with regards to anxiety, depression and/or PTSD
- **In October 2017, a new multi-disciplinary team was developed at Kingston Hospital (United Kingdom) to assess this group of vulnerable patients**

1. The National Institute for Health and Clinical Excellence (NICE) (2009) Rehabilitation After Critical Illness. NICE Clinical Guidance CG83



Aims

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- **Identification of need**
 - > Improvement of aftercare of critical care patients
 - > Address health, social, and psychological effects
- **Primary objectives**
 - > Develop a multidisciplinary follow-up clinic to implement NICE guidelines
 - > To co-ordinate after care of medical services
- **Secondary objectives**
 - > To collect data on patient satisfaction
 - > To feedback to staff for learning and professional development;



Method

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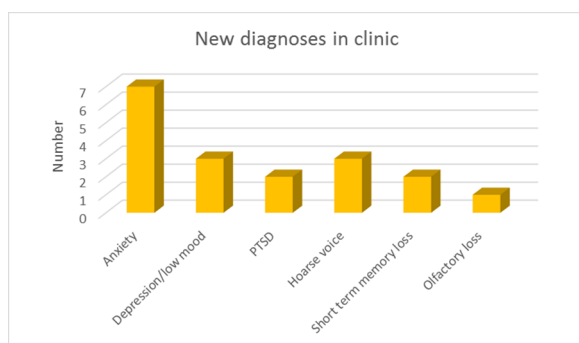
- **Business case submitted, successful funding awarded for clinic Oct 2017**
- **Monthly clinic**
- **Team**
 - > ICU consultant-led, senior nurses, physiotherapist, clinical psychologist
- **Retrospective review over 6-month period (Oct-Mar)**
 - > Patient demographics
 - > Mean length of stay (LOS)
 - > Referrals to secondary care services, physiotherapy, psychology
 - > Patient satisfaction via feedback questionnaire



Results

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- 26 new patients were seen in clinic
- Mean length of stay in critical care 17.3 days
- Mean length of stay in hospital 37.8 days



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Results

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- Feedback of clinic was overwhelmingly positive
- 31% felt they would benefit from patient support group

Discussion

- Large investments are made during a patient's stay on ICU
- This can be sustained only by good quality care following discharge
- Significant numbers of critical care survivors require ongoing support
- Engagement with primary and secondary care providers helps to ensure safety-netting of interventions
- Patients regarded the clinic as an extremely positive experience



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