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Introduction

It can be frightening when your relative is admitted to the Intensive Care Unit (ICU).

We hope this information will answer some of your questions, but please feel free to discuss any worries or problems you may have with a member of our nursing staff or medical team. We are here to help you.
The Intensive Care Unit (ICU) is a department for critically ill patients who need constant monitoring, treatment and specialised care for serious illnesses, major injuries or following operations. These patients also often need the support of a breathing machine (ventilator).

Staffing levels are higher than on a general ward, so one nurse will look after one or two patients depending on their needs. Doctors are always present on the unit. There is a consultant on duty on each unit, to ensure that patients have immediate access to a senior medical opinion. Doctors and nursing staff on this unit have undergone extensive training to give the high level of care that our patients need.

Patients on ICU Level 5 and 7 are looked after by the same medical and nursing team, as well as the same multidisciplinary team, which includes pharmacists and physiotherapists.

Because of clinical needs, males and females are nursed next to each other on the unit. But every effort is made to ensure privacy and dignity.

In 2015 The Hurstwood Park Neurological Unit moved from Haywards Heath and joined forces with the Brighton Critical care team. The Intensive Care Unit at the Royal Sussex County Hospital is split over two floors – ICU Level 5 and ICU Level 7. We have 31 beds; 16 on level 7 and 15 on level 5.

ICU Level 7 is on Level 7 of the Thomas Kemp Tower of the hospital. There are several routes to Level 7:

- Entrance to this building can be gained at Level 3 from the direction of the Barry Building.
- From Level 5 of Thomas Kemp if you are coming from the Accident and Emergency Department.
- From Level 6 coming from the multi-storey car park.
ICU Level 5 is on Level 5 of the Millennium Wing of the hospital. The Millennium Wing is on your left hand side coming from the multi-storey car park, and you will enter the building from Level 6. You can reach ICU Level 5 from Level 5 of the Thomas Kemp Tower.

What happens when a patient is taken to ICU?

When a patient is first admitted to ICU, it can take more than two hours for the doctors and nurses to assess the patient’s condition, attach necessary monitoring, insert lines / tubes and make them as comfortable as possible.

We appreciate that you will be anxious to see your loved one and it can be frustrating to wait for news, but it is important that the ICU staff stabilise the patient’s condition. A member of staff, the doctor or nurse will discuss the patient’s illness, treatment and plans of care with you as soon as possible.
Visiting the unit

How do I get into ICU?

For the safety of our patients there is a video entry system to the unit. When you arrive please ring the bell and wait until it is answered. Sometimes there is a few minutes’ delay in answering the door. This is probably because the nurses are busy with the patients. If this happens, please ring again – we do appreciate your patience.

There is a waiting area available for your use. Waiting is sometimes unavoidable, as there are many aspects of care which have to be done around the clock.

Visiting times

The visiting times are from 2pm to 7pm. In special circumstances you may visit outside of these times at the discretion of the nurse in charge. Visiting hours will be reviewed on a daily basis.

Who can visit?

- We ask that visiting is limited to immediate family or close friends as many visitors may be tiring for patients.
- Children can visit, but only at the discretion of both a parent and the nurse in charge. There are issues about the risk of infection for young babies, so please speak to the nurse in charge if you plan to bring a baby.
- Visitors are restricted to two per patient, due to lack of space and also to minimise any disturbance to other patients.
- Please respect the privacy and confidentiality of other patients in the unit. All patients have the right to this.
- To maintain patient confidentiality you may be asked to wait outside during doctors’ ward rounds and nurses’ handover.
Telephoning the hospital

We ask that you nominate one person to telephone the unit and pass the information on. This reduces the number of enquiries, allowing nurses more time with the patients.

In order to maintain patient confidentiality, and to prevent any misunderstanding, medical details are not usually discussed over the telephone.

The direct telephone number to **ICU Level 7** is **01273 664613**. Via the hospital switchboard the number is **01273 696955 Ext. 4275**.

The telephone number to **ICU Level 5** is **01273 696959 Ext. 3821**. You can also ring the hospital switchboard on 01273 696955 asking for ICU Level 5 or Level 7.

Information about your relative

We are happy to provide you with information at the time of visiting.

If you wish to speak with a doctor, ask a member of staff to arrange this for you.

During times of stress and anxiety it is easy to forget things. You may find it helpful to write down any questions you may want to ask the doctors or nurses. Please do not hesitate to repeat your questions at any time.

Using telephones

Please ensure that all mobile phones are switched off while in the unit to minimise the noise level and promote a stress-free environment for patients. The use of mobile phones, camera phones and other photographic devices risks infringing patient confidentiality, privacy and dignity.

Some bed spaces in ICU Level 5 have Hospedia at the bedside. Hospedia is a communication system which includes TV, radio and a telephone. A prepaid card is required to use Hospedia. Please ask a staff member for more information.
How can I help restrict infection?

Infection control is extremely important in ICU, as well as in the rest of the hospital. There are a number of ways you can help us in this area:

- Please ensure you use alcohol gel before entering and leaving the unit.
- An alcohol gel dispenser can be found at the patient’s bedside and at all entrances and exits. Using the gel will help to reduce the risk of cross infection.
- Please wash your hands with soap and water, if you are unable to use alcohol gel.
- Please leave your outdoor clothing at the entrance to the unit on the hooks provided but take any valuables with you.
- If your relative is being nursed in isolation, speak with a nurse before entering the room.
- Fresh flowers are not allowed in ICU as they can pose an infection risk.
- For hygiene and safety reasons please do not bring food or drink into the unit.
- Please do not sit on the patient’s bed.
- If you are ill, please speak to a member of staff before visiting the unit.
What can I expect when I enter ICU?

Your relative may look different, as they may be attached to lots of machines. They are likely to have drips and lines in their neck or arms. These are necessary to give medicine and monitor your relative’s condition. Your relative may also have tubes in the nose, such as a feeding tube. You may see many different pieces of equipment by their bed. Some of the equipment might help with breathing (ventilator), drug administration, or monitoring of blood pressure or heart rate. Your relative may be wearing an oxygen mask or they may have a special tube inserted in their mouth, nose or throat to help them breathe. They may appear swollen, or may suffer with hair loss, which is common in critically ill patients. Most patients have a urinary catheter and some may have surgical drains. There may be beeping noises or occasional alarm sounds. This is normal and does not necessarily mean that something is wrong. The nurses will explain the machines to you if you wish.

It may be very distressing for you, but it is a necessary part of patient care.

Please refer to Equipment, Devices and Procedures to be expected in the Intensive Care Unit booklet. This booklet describes the machines, lines, monitoring and explains terms commonly used in ICU in more detail.

Can I touch my relative?

Do not be afraid to touch your relative. Although there are tubes, wires and equipment, it is still possible to touch your relative. You may hold their hand; the nurse will show you how to do this safely.
Can I talk to my relative?

Patients in ICU are often unconscious, at least during the early part of their treatment. This may be because they are given drugs to make them sleepy and comfortable. It is possible that a patient can hear, even if they cannot respond. Nurses and doctors often talk to unconscious patients to tell them what is happening. Feel free to talk to your relative and let them know that you are there. They may hear you even though they seem unable to.

If your relative is expected to stay in ICU for more than three days the nurses may start a diary for them. This can help to fill in missing memories for your relative during their recovery. It can also help you to look back and see small improvements that the patient has made. Your relative may not remember events during the time in ICU and may need to reflect on their experience of the critical illness retrospectively. Patient diaries are updated daily by the nurse, physiotherapist and other team members, and also relatives and friends. The diary provides a story of their stay in ICU and is completely separate from the health records. The diary may be given to the patient at discharge from ICU or hospital depending on circumstances.

Can I get involved in my relative’s care?

If you wish at any stage to help with the care, please feel free to ask. The nurses are quite happy to let you assist with the care of your relative or friend. This may include helping with washing, performing mouth care, eye care, shaving, hair care, foot massages and helping with feeding.
Whilst in ICU, patients are looked after by the intensive care team. The patient care is managed in consultation with the original team that admitted the patient to the hospital and any other specialist who may contribute to the patient’s recovery. Most of our staff rotate within ICU levels 5 and 7.

**Doctors**
The patient care is led by the Consultant Intensivist, who is a specialist in intensive care medicine. Although you may be introduced to different consultants, they will be given an in-depth handover, so they are aware of your relative’s health problems. We have one consultant per ICU site every day. Consultants are supported by specialist doctors who are in different stages of their medical training.

**Matron**
Our matron is a sister with extensive clinical, management and leadership experience in intensive care. Matron ensures that patients receive highest standards of care by ensuring that staff follow the set guidelines and policies. Matron wears a purple tunic and is available to you if you have any concerns about patient care.

**Nurses**
The Sister/Charge Nurse or senior staff nurse co-ordinates each shift. Each staff nurse looks after one or two patients depending on their nursing needs.

Nurses are supported by critical care nursing assistants and specially trained health care assistants.
Physiotherapists
Our team of physiotherapists assess the patients daily and identify areas which need to be treated. Therapy may include listening to breathing, helping to clear the lungs, promoting a range of movement exercises, muscle strengthening exercising and promoting mobility such as transferring to a chair and aiding with walking.

Pharmacists
The pharmacists ensure that medication prescribed is accurate, appropriate and safe to use. The pharmacists advise the medical team on the ward round.

Speech and Language Therapists
This team is also known as the SALT team. The SALT team assess and treat any swallowing and eating problems.

Critical Care Outreach Team
The Critical Care Outreach Team consists of specialist nurses trained in intensive care who provide the link between ICU and the wards. Critical Care Outreach nurses guide nursing staff on the wards to enable them to deliver appropriate care for the patient. Critical Care Outreach nurses will follow your relative’s progress on the ward after discharge from ICU. The team also facilitates follow up clinics for patients discharged from ICU. They will also give you an ICU steps booklet, which has information about recovery from critical illness.

Technician
ICU has a specialist technician who maintains the equipment, trains staff how to use it, and replaces it when necessary. The technician is supported by three technician assistants.

Specialist nurses
Nurses specialised in areas such as head Injury, pain control, stoma care, wound care and diabetes also contribute to our patients care.

Other members of the team
Ward clerks, a secretary and domestics service team.
Research in ICU

As ICU is part of a teaching hospital and major trauma centre, research is very important to us. Doing our own research and taking part in national and international research projects gives us the opportunity to practise evidence-based medicine.

Patients and relatives may be asked to participate in the research. The research nurse will contact you with regards to possible study involvement and consent.

The research nurse screens patients for various studies and makes sure that we conduct the studies in accordance within the Good Clinical Practice Guidelines. All research is ethically approved by an independent committee of experts to protect our patients’ best interests.

The data, which has been very carefully anonymised, goes back to the study’s Chief Investigator and team. They will interpret it and publish the results in the appropriate journal.
How to identify staff

All staff wear a badge so you know if someone is a doctor, nurse or other member of the ICU team. Everyone in the unit should introduce themselves to you.

Consultant: green scrubs/plain clothes
Doctor: light blue scrubs
Matron: purple tunic
Sister/Charge Nurse: navy blue scrubs
Senior Staff Nurse: bright blue scrubs
Staff Nurse: light blue scrubs
Critical Care Outreach Sister: navy blue tunic with red lining
Health Care Assistant: grey scrubs
Physiotherapist: white tunic with blue lining
Technician: dark grey scrubs
Technician Assistant: grey scrubs
Student Nurse: white tunic
Domestic Staff: grey tunic with blue piping.
**What are ward rounds?**

Ward rounds are led by the ICU consultant every morning usually starting between, 8.30am and 9am and again in the evening. Each patient’s progress is discussed and a treatment plan reviewed. The ward round may take up to five hours or more, as all the patients are seen.

**Does a patient need any personal items in ICU?**

**Clothing and valuables**

Due to our limited space we ask that possessions are kept to a minimum and items of clothing and valuables are taken home. The majority of critically ill patients are more comfortable when nursed without their personal nightclothes. If we need these, we will ask you to bring them later.

**Personal items and toiletries**

Patients may appreciate their own personal items and toiletries such as:

- Deodorant/perfume – aerosol deodorant rather than roll-on
- Hairbrush or comb
- Shaving equipment, shaving cream
- Dentures, spectacles and hearing aids
- Postcards and photographs of relatives and friends

Do feel free to bring any other toiletries the patient may like. You may also bring books or a CD/DVD player with favourite music and films.

Cards and letters may be sent and will be left for a relative or friend to open when visiting.

It may be helpful to us if you bring in a photograph of your relative, as critically ill patients often look quite different than before they were ill.
Practicalities when visiting the hospital

Transportation

Parking
The multi-storey car park is on North Road within hospital grounds. This multi-storey is a pay-on-foot car park. Parking is limited and waiting times can be up to an hour. Pay-and-display parking is available in surrounding streets.

Bus
The Royal Sussex County Hospital is in Eastern Road, Brighton, and is served by buses 1, 1a, 7, 14b, 14c, 23, 37, 37b, 40x, 47, 52, 57, 71, 73, N7, N1, 94A, 270.

Taxi
There is a taxi rank in Paston Place opposite the hospital, and a free taxi-phone near the reception desk at the main entrance of the Barry Building.

Train
The nearest station is Brighton, which is about a 40-minute walk from the hospital.

Facilities
There is a main waiting area outside of each unit. The main waiting room on Level 7 is opposite the lift. There are chairs, a sofa, vending machine for drinks, and visitors’ toilet. The main waiting area on level 5 is outside of the entrance to the unit. Visitors toilets can be found close by, opposite the millennium wing lifts and a WRVS café/shop can be found on the same level near A&E.

We have also two small interview rooms located on each unit. These small rooms are used for the medical team to speak with relatives privately, these are not waiting rooms.
Can I stay overnight?

We understand that you might like to stay with your relative most of the time, but don’t underestimate the stress on yourself. It is important to acknowledge that your relative will need your help when recuperating. We also want to make sure that patients will get their rest. In special circumstances staying overnight may be required, and would need to be discussed with the nurse in charge. In this case you would have to stay in a waiting room, as ICU does not have visitors’ sleeping accommodation.

Shops and hospital services

There is a Costa Coffee shop and a convenience/newspaper shop in the main entrance of the Barry Building (entrance on Eastern Road), open Monday to Friday from 7am to 7pm and weekends from 9am to 6pm.

Waves Restaurant is adjacent to the Royal Alexandra Children’s Hospital and is open seven days a week: Monday to Fridays 7am to 7.30pm and weekends from 9am to 4pm.

The Terrace Restaurant is on the third floor of the Audrey Emerton Building, on Eastern Road, next to the Eye Hospital. Open Monday to Friday 8am to 5.00pm.

A WRVS café is on Level 5 of Thomas Kemp, adjacent to the Accident and Emergency Department, there you can buy hot and cold drinks, light snacks, rolls and sandwiches.

A WRVS café and WHSmith are on the ground floor of the Royal Alexandra Children’s Hospital.

Cashpoint

A cash point is situated outside of the Barry building. Turn right out of the main entrance and the cash point is just around the corner.
Looking after yourself

Visiting an intensive care unit and coping with the experience may be very tiring and difficult for you. It can be helpful to speak with someone about what you are going through. Fear and the unknown can cause anxiety. Please ask our staff if something is bothering you.

It is understandable to be worried about your loved one, but it is important to take care of yourself. Try to get rest as often as you can and attempt to sleep during the night, not the day. Remember to eat sensibly too. You will need your strength.

Chaplaincy and Spiritual Care Department, Ext. 4122

We are aware that spiritual and religious beliefs might be important to you and your relative.

A hospital chaplain is available for support and prayers. The chaplaincy can also contact the local clergy of a different religion. If you wish to speak with a chaplain or you would like a chaplain to visit your relative, please let the nurse know.

The hospital chapel is situated in the Barry Building on the first floor, and is open to everyone.

What if I want to make a suggestion, comment or complaint?

We always welcome suggestions. It is important that any problems or difficulties are dealt with quickly, and at an early stage. Comments and concerns can be related to staff on the ward.

We would appreciate your feedback by filling in a relatives’ questionnaire which can be found in the ICU waiting area in the ICU Level 7 and in the small interview room on Level 5.

Feedback and suggestions can help us to improve our services and provide better care for patients.
The Patient Advice and Liaison Service (PALS), Ext.4029

The PALS team provides confidential advice and support, helping you with any concerns about the care provided and advising on different services available from the NHS.

Brighton and Sussex University Hospitals NHS Trust employs a Patient’s Advocate, who acts on behalf of patients, their relatives or carers, helping them deal with any difficulties that may arise. The advocate can be contacted on 01273 696955 Ext. 4588.

Interpreter and Communication Services

If you find communication difficult because you are a non-English speaker or have hearing impairment, please speak to a member of our team and we will arrange an interpreter for you.

How long will my relative need intensive care?

The length of stay in ICU may be from a few days to weeks. It is hard to predict as a patient’s condition may improve or deteriorate quickly. The presentation of the illness and outcome of the treatment vary as each patient responds differently. Our medical and nursing teams will give you as much information as they can and update you regularly about the patient’s condition.
Patient transfer

At times it may be necessary to transfer a patient at short notice. A transfer is usually to another ward in the hospital, but on rare occasions it may be to another hospital. The reason for a transfer could be to facilitate more specialised care for your relative or to make room for an emergency admission. The decision to transfer patients is always made by the Intensive Care consultant, as patient care and safety are of paramount importance. We will make every effort to tell you about a transfer beforehand.

If a patient dies

Unfortunately, due to the severity of their illness not all patients will survive. Death of a loved one is always a devastating event, even if it was expected. Sometimes there is little warning before someone dies, and there may not be enough time for the family to return to hospital.

We will always aim to make your relative comfortable and prepare them for a peaceful and dignified death. During this time we will try to give you and your family as much support and privacy as possible. This support may include the help of specialist nurses, whose role is to ensure the patient’s end-of-life wishes are carried out.

Additional support is available from the hospital chaplaincy and bereavement team, who are able to provide spiritual support for most religions. Please ask a member of staff to contact them for you.
What to expect following discharge of a recovering patient from ICU

Patients are discharged from ICU to a general unit once the medical team decide they no longer need close observation. Moving to a general ward is for many patients a very important step forward in their progress to recovery. However, during this transition, some patients report feelings of anxiety, insecurity or isolation. This is natural as patients have got to know the critical care staff and become used to the security of being cared for by one nurse. Be assured that your relative will soon get to know the ward staff and the ward routine.

On the ward there will be less staff, equipment and fewer procedures than in ICU, as your relative will no longer require the previous level of support. The ward staff recognise that a patient who has been critically ill may need extra help as they are weak and may tire easily.

The ICU team (medical team, nurses and physiotherapists) will identify and discuss with your relative any physical or psychological problems and their rehabilitation needs prior to discharge from ICU. Ward staff will receive a comprehensive handover about your relative’s health status from the team.

Soon after discharge from ICU your relative may be visited by one of the Critical Care Outreach team if their condition dictates. A Critical Care Outreach nurse will assess your relative’s care needs and collaborate with nursing staff to make sure that all patient needs are met.

If you have any concerns at this stage, please tell a member of the nursing staff immediately.
Follow up from ICU after hospital discharge

This is in addition to the follow up from your ward medical team. If your relative has been in ICU for a long stay we will contact them two to three months after discharge from ICU with details of the ICU follow-up clinic and the patient support group, ICU steps. These are optional additional support services from ICU. You can attend meetings of one or the other, or both.

The purpose of the ICU follow-up clinic is to monitor your relative’s progress and recovery at home. Your relative may have ongoing physical problems or feel low or more anxious than usual. The clinic offers the opportunity for your relative (or his / her close relative) to discuss any problems and to ask any questions about the stay in intensive care. The appointment will last for about 30 to 40 minutes.

ICUsteps support group

ICUsteps is a support group for former ICU patients in the Royal Sussex County Hospital and the Princess Royal Hospital. ICUsteps is a national charity founded in 2005 by ex-patients, their relatives and ICU staff to support patients and their families on the road to recovery from critical illness.

The support group currently meets at a school in Brighton. Whether you’re an ex-patient or a relative, being able to talk about what you’ve been through with people who understand, because they’ve been through it to, can really help recovery from a critical illness.

Please speak to our staff regarding the ICUsteps booklet, which has information about recovery from critical illness.

Website: www.icusteps.org
Sources of help/useful Information

ASSIST Trauma Care
Help and support for people affected by severe trauma.
**Helpline:** 01788 56080
**Website:** www.assisttraumacare.org.uk

Asthma UK
A charity dedicated to improving the health and wellbeing of people in the UK whose lives are affected by asthma.
**Helpline:** 0800 121 6244
**Website:** www.asthma.org.uk

Brake
A road-safety charity helping seriously injured accident victims and their relatives or friends.
**Helpline:** 0845 603 8570
**Website:** www.brake.org.uk

British Association for Counselling and Psychotherapy
For details of counsellors and psychotherapists in your area.
**Phone:** 01455 883300
**Website:** www.bacp.co.uk

British Heart Foundation
A charity that offers support and gives information on the health of your heart.
**Helpline:** 0845 070 8070
**Website:** www.bhf.org.uk

British Lung Foundation
A charity supporting people affected by lung disease.
**Helpline:** 0300 330 3311
**Website:** www.bhf.org.uk

Carers Trust
Carers Trust is the largest provider of support services for carers in the UK
**Website:** www.carers.org
Citizens Advice Bureau
The Citizens Advice Bureau helps people deal with their legal, money and other problems by providing free, independent and confidential advice.
Website: www.citizensadvice.org.uk

The Colostomy Association
Providing support and information to anyone who has a colostomy.
Helpline: 0800 328 4257
Website: www.colostomyassociation.org.uk

Cruse Bereavement Care
Cruse Bereavement Care provides counselling, support, information, advice, education and training services to the friends and relatives of someone who has died.
Helpline: 0844 477 9400
Website: www.cruse.org.uk

Diabetes UK
The largest charity in the UK for the care and treatment of people with diabetes.
Helpline: 0345 123 2399
Website: www.diabetes.org.uk

Head Injury Specialist Nurses 01273 696955 Ext. 3487/3488

Headway
A charity that promotes understanding of all aspects of brain injury and provides information, support and services to people with a brain injury, their families and carers.
Helpline: 0808 800 2244
Website: www.headway.org.uk

HealthTalkOnline
Former patients and their relatives relate their intensive care experiences on film.
Website: www.healthtalkonline.org/peoples-experiences/intensive-care
HEART UK
Heart UK provides support and guidance for people with concerns about cholesterol.
**Helpline:** 0845 450 5988
**Website:** www.heartuk.org.uk
**Community:** www.heartuk.org.uk/healthunlocked

ICU Delirium
The goal of ICU Delirium is to enhance awareness of and improved monitoring for brain dysfunction as an acute and chronic ailment that people suffer from when they develop critical illness.
**Website:** www.icudelirium.org

Macmillan Cancer Support
Macmillan Cancer Support improves the lives of people affected by cancer. It provides practical, medical, emotional and financial support and campaigns for better cancer treatment.
**Helpline:** 0808 808 0000
**Website:** www.macmillan.org.uk

Meningitis Now
A charity which provides emotional and financial support for people affected by meningitis
**Helpline:** 0808 801 0388
**Website:** www.meningitisnow.org

PatientUK
This website allows people to download, or listen to, evidence-based information leaflets covering a wide range of medical and health topics.
**Website:** www.patient.co.uk

Samaritans
Samaritans provides confidential, unbiased emotional support, 24 hours a day, for people who feel distressed, desperate or suicidal.
**Helpline:** 0845 790 9090
**Website:** www.samaritans.org
Spinal Injuries Association
A support charity for people suffering from spinal cord injuries.
Helpline: 0800 980 0501
Website: www.spinal.co.uk

Stroke Association
An organisation that provides support for stroke survivors, their families and carers.
Helpline: 0303 303 3100
Website: www.stroke.org.uk

The UK Sepsis Trust
The UK Sepsis trust works to promote awareness of sepsis, improve its treatment and provide support to patients and their relatives.
Phone: 0845 606 6255
Website: www.sepsistrust.org

Winston’s Wish
A charity for children whose parent, brother or sister has died. Winston’s Wish helps them to rebuild their lives and face the future with hope.
Helpline: 0845 203 0405
Website: www.winstonswish.org.uk
Many thanks to Kim Sinclair who edited the manuscript and contributed immensely to the project.