

**Patient
Information**

Visiting a patient in the Critical Care Department

Introduction

This leaflet gives a brief introduction as to what to expect when visiting a patient in the Department of Critical Care (DCC) at Gloucestershire Royal or Cheltenham General Hospital.

Patients are admitted to the DCC for close observation and supportive treatment, either after major surgery or during the most acute phase of an illness.

The DCC in Gloucestershire Royal Hospital is a 19 bedded specialist ward and is situated on the first floor of the Tower Block.

Attached to the Gloucestershire Royal DCC has 3 different areas, called Pod A, Pod B, and Pod C and as a patient you may be moved from one pod to another. This unit is for patients who are admitted after surgery and require close observations for a short period of time.

The DCC in Cheltenham General Hospital is a 12 bedded specialist ward and is situated on the ground floor of St Luke's Wing.

Both DCC's are mixed sex wards with male and female patients. However, it is very important that the dignity and privacy of the patient that you are visiting is maintained at all times.

Although great care is taken to avoid transferring patients, it is sometimes in best interests that we move a patient to the other hospital site for treatment or to help with your recovery.

What to expect when visiting DCC

The DCC can be a noisy environment with lots of activity and alarms sounding. This does not necessarily mean that there is a problem. The nurse will explain the noises and interventions to help reassure you if you are worried.

To enable staff to monitor a patient's vital signs (heart rate, breathing, blood pressure) and give treatment, they may have various wires, tubes and pieces of equipment attached to them.

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Department

Critical Care

Review due

June 2028

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Patients in the DCC may be deeply asleep following an anaesthetic or from sedative drugs and may need help with breathing. This respiratory help is given via a tube that goes down the windpipe. The tube is attached to a ventilator (breathing machine) and goes past the voice box which means that the patient will temporarily be unable to speak. Communication aids will be provided as needed.

As the patient wakes or their condition improves, the tube can be taken out, but they may still need oxygen via a face mask.

Please speak to the nurse in charge if you have any questions or if you have been called in and feel you have been waiting in the relative's room too long, please use the telephone at the desk if you are in Gloucester to call the unit to ensure they know you have arrived. If you are in Cheltenham, please use the bell at the door and talk over the intercom.

Staff

Nurses – Nurses are all specially trained and have a maximum of 2 patients to care for per shift. Both female and male Staff Nurses wear a blue uniform. The Health Care Assistants wear a green tunic or dress. The Sister/Charge Nurse wears a navy uniform and a red 'Nurse in Charge' badge is worn by the shift co-ordinator. The nurses all work at both the Gloucestershire Royal and Cheltenham General DCC.

Doctors – All patients have a consultant surgeon or physician responsible for them. While in the DCC they will also be cared for by the Critical Care Team, consultants and resident doctors. Regular discussions and clinical updates between the patient, their relatives or carers and the nurses and doctors are encouraged.

Physiotherapists – The physiotherapist will assist patients daily with breathing exercises to help prevent chest infections.

They will also help with mobilisation as the patient's condition improves. Physiotherapists wear blue trousers and a white tunic or polo shirt.

Other disciplines – Staff who also contribute to patient care and the unit are the pharmacist, dietician, radiographers, psychologist, an infection control consultant, the ward clerk, domestic staff and hospital volunteers.

Patient Information

Infection control

While patients are unwell, they may become vulnerable to infections. On admission to the department, all patients are routinely checked for Methicillin Resistant Staphylococcus Aureus (MRSA). Please ask for a copy of the MRSA leaflet if one has not already been given.

Visitors **must use** the cleansing hand foam provided when entering and leaving the ward area. Please let the staff know if the hand foam containers are empty. Strict infection control procedures apply to all staff and visitors. Please do not be afraid to ask staff to wash their hands.

If you are unwell do not visit, please stay at home until completely well.

If you are concerned about anything, please ask a member of the team and we will try our best to help.

Spiritual needs

A hospital chaplain is always on call and spiritual advisors of all denominations are also available if patients or their relatives would like their support. Please ask a member of the team to arrange for a chaplain or advisor to visit.

Visiting

We encourage visiting in the afternoons as mornings can be very busy due to doctors' rounds, physiotherapy and X-rays, which may involve long waiting times for visitors. It is also important to have periods of quiet time to allow patients and their relatives to rest. A visitors' room with drinks facilities is situated in the reception foyer.

There are limited facilities for relatives to stay overnight. If this is considered necessary, please ask a member of staff for more details.

Parking

When your close family member has been a patient in the DCC for 3 days we are able to offer you access to reduced parking fees. Please speak to the nurse caring for your relative or to the sister in charge.

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Planned admissions

If you feel that your relative or the person you care for would benefit from a visit to the department before their admission, please contact the unit or ask the ward staff to arrange. A nurse will be happy to greet you, show you around the department and explain the equipment that may be used during admission. They will also answer any questions that you or the patient may have.

Teaching

Our Critical Care staff are highly motivated to continually improve their knowledge and skills to allow them to provide the best care for our patients. We are proud to be an area that encourages and supports staff education.

Please be aware that teaching takes place daily within the clinical area including the patient bed spaces. We actively encourage all nurses to ask a more senior colleague if they have any questions, concerns or require advice, regarding the care of a patient, as this is deemed supportive to staff and helps to ensure the safety of the patients in our care.

Property

Due to the lack of space and the need for rigorous infection control, a limitation of the patient's personal property is essential. We suggest wash items only (no flannels), there is no need for nightwear as gowns will be given. Valuables such as money or mobile phones should not be brought in.

Transfer to the ward

Once the patient's condition improves and they require less close observation, they will be transferred to a general ward. This is a positive step and reflects the improvement in the patient's condition. The Acute Care Response Team (specialist nurses) may follow up the patient's recovery on the ward.

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When you are discharged from DCC and transferred to an inpatient ward the relative of the patient will receive a copy of leaflet 'After critical care' GHPI0110, which will explain this in more detail. Please ask a member of the nursing team if you do not receive one.

Further sources of support

The organisation ICU steps provide information and advice for Critical Care patients, relatives and carers. Please visit website <https://icusteps.org/information/guide-to-intensive-care>

Contact information

Relatives can enquire about a patient's condition by telephoning the department. We suggest that 1 or 2 people are appointed to ring on behalf of the patient's family and friends. You can contact us at any time, day or night.

Department of Critical Care - Gloucestershire Royal Hospital

POD A

Tel: 0300 422 6182

POD B

Tel: 0300 422 6178

POD C

Tel: 0300 422 8852

Department of Critical Care - Cheltenham General Hospital

Tel 0300 422 4013

Tel 0300 422 2593

Patients, relatives, carers and visitors should contact the sister in charge if they have any concerns about care and cleanliness.

Your comments and feedback are always valued. Feedback forms can be found on the ward and in the relative's room.

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Making a choice

Shared Decision Making

If you are asked to make a choice, you may have lots of questions that you want to ask. You may also want to talk over your options with your family or friends. It can help to write a list of the questions you want answered and take it to your appointment.



Ask 3 Questions

To begin with, try to make sure you get the answers to three key questions if you are asked to make a choice about your healthcare.

1. What are my options?
2. What are the pros and cons of each option for me?
3. How do I get support to help me make a decision that is right for me?

These resources have been adapted with kind permission from the MAGIC Programme, supported by the Health Foundation* Ask 3 Questions is based on Shepherd HL, et al. Three questions that patients can ask to improve the quality of information physicians give about treatment options: A cross-over trial. Patient Education and Counselling, 2011;84: 379-85

<https://aqua.nhs.uk/resources/shared-decision-making-case-studies/>