

How can I help reduce healthcare associated infections?

Infection control is important to the well-being of our patients and for that reason we have infection control procedures in place. Keeping your hands clean is an effective way of preventing the spread of infections. We ask that you, and anyone visiting you, use the hand sanitiser available at the entrance to every ward before coming in to or after leaving the ward. In some situations hands may need to be washed at the sink using soap and water rather than using the hand sanitiser. Staff will let you know if this is the case.

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Rehabilitation and Goal Planning at the NSIC

Patient information leaflet

If you require a translation or an alternative format of this leaflet please call PALS on 01296 316042

Safe & compassionate care,

every time

After a spinal cord injury (SCI), it is easy to feel daunted and overwhelmed because of all the new things to adjust to and learn. It can affect all aspects of your life: physical, emotional, social and vocational. The rehabilitation process entails learning to manage these changes successfully. Goals will be set with you to help you make these adjustments and support is provided along the way.

Discharge from the NSIC involves many challenges and adjustments; goal planning is a way of assessing and meeting your individual needs to help you to leave us with the resources and confidence to cope and adapt successfully to your new environment. This booklet aims to help you understand more about your rehab and gain a sense of control.

Who and what is involved?

Needs assessment and goal planning involve you and your team making decisions about the priorities and goals for your rehabilitation. This helps to ensure that your rehabilitation programme is geared towards your individual needs, building on the strengths you have and the things that are important to you. We have found that involving patients in setting small, manageable targets and goals helps their adjustment to SCI and makes rehabilitation easier for you to understand and participate in. Research has shown that when people actively participate in their rehabilitation, they are less likely to feel overwhelmed and more likely to cope and adjust in the longer term.

You will have a range of people working with you in rehab: nursing and medical staff, physiotherapists and occupational therapists (OTs), clinical psychologists and case managers. One of these will also be your **Keyworker** - someone who helps co-ordinate your rehab through supporting you and the team to set goals.

Concerns

If you have any concerns about the treatment and rehabilitation you receive, or about your experience at the NSIC, please raise them with your Keyworker or other member of staff.

If you are particularly happy about the service you receive at the NSIC, you are welcome to let us know, preferably in writing. All NHS Trusts have a commitment to monitor and improve the quality of their services and therefore comments from users of those services are especially helpful.

What happens?

Firstly you will complete a **Needs Assessment Checklist (NAC)** with your keyworker or named nurse. The NAC is a measure of your knowledge and understanding of spinal cord injury and the progress you have made. At the beginning of your rehabilitation, your knowledge will understandably be limited but the NAC helps us guide rehab around your needs. It has been written by the staff here at the NSIC and has been used for many years to guide our rehabilitation programme. It sets out standards about spinal cord injury care and rehabilitation based on current evidence and best practice, and we use it to measure the outcome of your admission and the service provided here at the NSIC. You will complete a second NAC about six weeks before your discharge.

After the NAC is completed, you will receive a summary a few days later. A graph will show the areas of rehabilitation you have already learnt about and are able to manage, and the summary will list the needs that you now have because of your injury. These needs will be used to set targets and goals for your rehab programme.

Goal Planning involves you and your team meeting to set short-term targets (things you will focus on over the next few weeks) and longer term goals. Goals will be very practical, clear and constructive: things like learning to get dressed or transfer into a wheelchair, and looking after your body now, or they may involve setting goals about going home for the weekend and your discharge. Goal planning meetings will take place all the way through your rehabilitation at the NSIC. Each meeting will review the goals from the last meeting and new goals will be set as you progress.

The primary goal of rehabilitation is to support you in gaining the skills to deal with the new challenges and adjustments relating to your injury, leading to a safe discharge back into the community.

What does my keyworker do?

- Helps you to understand the needs you now have after your spinal cord injury;
- Gives you information and support, and advocates on your behalf;
- Coordinates and oversees your rehabilitation.

If you have any concerns or worries about your rehabilitation, please speak with your keyworker - part of their role is to help support you.

What are my needs now?

Spinal cord injury is a very complex injury involving many interlinked systems in your body. The NAC looks at each of these areas and the knowledge and skills that you need to gain. It consists of the following areas of need:

Physical Healthcare

This section asks about your previous health and includes new aspects that may have been affected, such as breathing. It asks about any pain or other problems you might now have and also your knowledge of medication. The nature of your injury and the extent of any paralysis will be explained by your doctors and through a Rehabilitation Information Meeting.

As part of your rehabilitation you may see other staff to help you with specific needs, such as nutrition and dietetics, speech and language therapy, or staff to advise on specific aspects of care.

The last six weeks of your admission are usually spent on St Joseph's ward, which specialises in pre-discharge rehabilitation. Within a few days of being on the ward, you will complete a second NAC to measure your progress and enable us to address any outstanding areas of need. A third NAC will then be completed once more within a few days of your discharge from the NSIC.

The level of SCI you have may make you dependent on other people for a variety of tasks. The essential goal is to enable you to remain in control of your life, even though you may require help in achieving certain physical tasks - verbal independence is critical to your successful return to the community. Advice about personal assistants and the recruitment and training of carers is available. Your Case Manager will also talk with you about your financial well-being and can assist you in claiming benefits, if needed. Applications for assistance from charitable sources can also be arranged where a specific need is identified.

SCI is a complex injury needing specialised care and rehabilitation. All members of the team contribute to your rehabilitation and examples about some of their roles have been talked about already.

Other people who can help support you specifically are:

The **Patient Support Officer** will see and support any patient in the Centre. This person has been a patient themselves and therefore understands some of the issues that may be a concern, and also sits on the governing board of the NSIC so can raise important issues there;

The **Family Counsellor** is a point of contact for any member of your family and can provide support for them. We are very aware that your injury will have affected not only you, but your family as well. It is important that your family knows about your condition and progress. Your family will be invited to attend Relatives' Day. Members of the team are always available to discuss with your family any specific concerns.

Daily Living Activities

This concerns day-to-day aspects like eating and drinking, washing and personal hygiene. Occupational therapists will work with you in all these skills.

Skin and Posture Management; Bladder Management; Bowel Management

These three sections of the NAC concern changes to your body since your injury, and your knowledge and skills in caring for them. Depending on the severity of your injury, these aspects will all be affected and may need long-term management and changes. Nursing staff will provide you with practical information on how to manage these and your general healthcare.

Mobility; Wheelchair and Equipment:

Getting out and about is as important now as it has always been. The physiotherapists can help you prepare for this by involving you in exercises to improve your strength, balance, coordination and range of movements. They will assess your wheelchair and cushion needs to enable you to get around as independently as possible.

If you require a powered wheelchair, the OTs will provide you with appropriate advice. Any other equipment requirements will be identified with you and arrangements made for these on discharge.

Community Preparation

It is important to get back to your previous lifestyle as soon as possible, and participate again in the things that are important and of value to you. This will involve resuming your role within the family, at work and with friends. It is a gradual process that will begin whilst you are in hospital, often starting with a weekend in the NSIC bungalow, trips out and weekends at home. OTs and other staff will talk with you about all these aspects, and your hobbies and interests, so that rehabilitation is personal to you. As part of your weekly rehabilitation programme, time is available for ongoing sport and recreation.

Learning about your health needs and SCI is important in helping you develop independence and control.

The **Patient Education Coordinator** organises a group teaching programme for patients, and a Relatives' Day for your family and friends. We also offer a day specifically for child relatives - please ask for information.

Psychological well-being

There is no set way of feeling or coping. Following your injury, you may experience a variety of thoughts and feelings. There are few life events that can prepare us for such sudden changes. People may get depressed about losses and changes, feel anxious because of fears and doubts about the future, or get angry at a sense of injustice. All these feelings are normal emotions.

The process of adjustment, adaptation and acceptance may produce emotions which are difficult to cope with alone. There are a variety of people who can help with these issues, such as your family, friends and staff members. Clinical Psychologists are available to help you manage these and more specific concerns. Our experience indicates that most people learn to manage the consequences of their disability well and go on to live a quality of life consistent with their pre-injury expectations.

Your sexual needs remain the same after SCI, although specific aspects of sexual functioning may be impaired. Medical staff are available to discuss issues related to fertility, and other staff members such as a Psychosexual Counsellor, nurses on the ward or in Outpatients, as well as Clinical Psychologists, can discuss other aspects with you. Find someone whom you feel comfortable with to discuss these important issues.

Discharge Coordination

The process of planning your discharge from hospital starts from the day of admission to the NSIC. Contact will be made with people in your local area to plan for the things you may need. This could include adaptations to your home or maybe a package of care to help support you in the community. Case Managers at the NSIC coordinate this and will meet with you early on in your rehabilitation to discuss what best suits your needs and identify people in your local area for you.