

The development and evaluation of a virtual critical care outpatient group

Joy McAdam, Critical Care Clinical Nurse Specialist
Cambridge University Hospitals



CRITICAL CARE CNS TEAM
Enhancing the patient and their
loved ones journey

Summary:

- Purpose of the groups
- Significance of ongoing support from critical care
- Design of the groups
- Results from patient feedback
- Conclusions
- References

Purpose:

- Support psychological recovery following a critical care admission
- Alongside telephone and face-to-face multi-disciplinary follow up clinics
- Been home from hospital for at least 4 weeks
- Opportunity to gain more understanding and knowledge
- Chance to meet others
- No obligation to contribute

Significance:

Patients often have complicated and persistent morbidity following critical illness, with very specific needs (Herridge and Azoulay, 2023)

Critical care is no longer just about survival, there is increased awareness and focus on ongoing quality of life (FICM, 2021)

Additional focus should be on patients' quality of life following critical care discharge (Clarissa, 2023)

Rehabilitation has the potential to reduce the need for support, by improving independence and autonomy, therefore relieving the burden and costs of ongoing care for both families and society (Turner-Stokes *et al.*, 2016)

Peer support:



- Can benefit survivors
- Reduce social isolation
- Increase motivation
- Share experiences
- Readjust expectations
- Gain sense of purpose
- Give back to others

Design of the groups:

- Virtual groups run via Microsoft Teams
- Facilitated by psychologists, occupational therapists and clinical nurse specialists
- Information giving with PowerPoint and videos
- Opportunity for questions and answers, open conversation, peer support
- 1 family member is welcome with patients but not on their own
- Weekly handouts emailed
- Anonymous online feedback survey sent following completion of programme



Four-week programme:

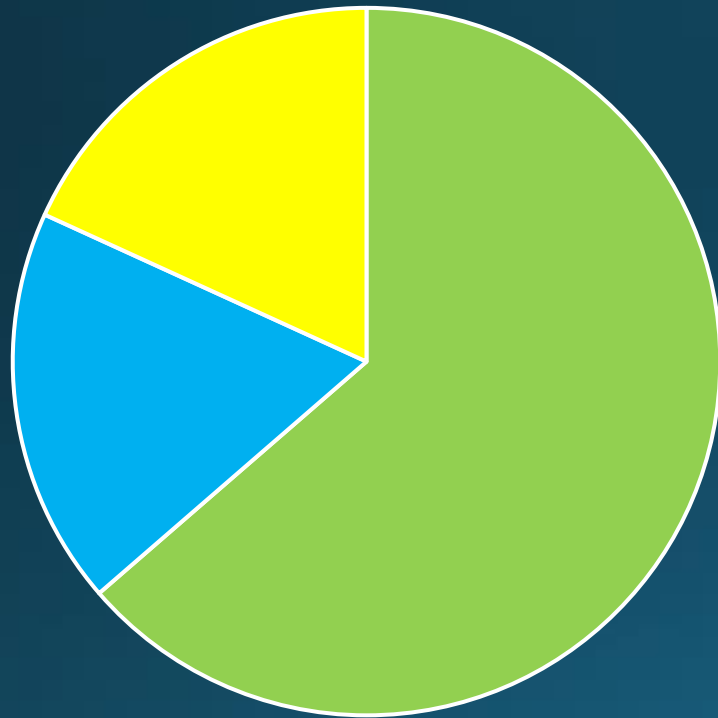
- Week 1 – Psychological responses to a critical care admission
- Week 2 – Understanding delirium and ICU related trauma
- Week 3 – Psychological adjustment to recovery
- Week 4 – Adapting to recovery at home

Numbers:

- Data collection: 1 August 2022 – 31 July 2023
- Number of programmes run: 6
- Number of patients attended: 19
(1 patient attended 50%, 1 patient attended 25%, 1 patient attended group 1 twice)
- Number of patients who showed interest but declined on enrolment: 11
- Number of completed surveys: 11
(4 of these surveys not completed in full)

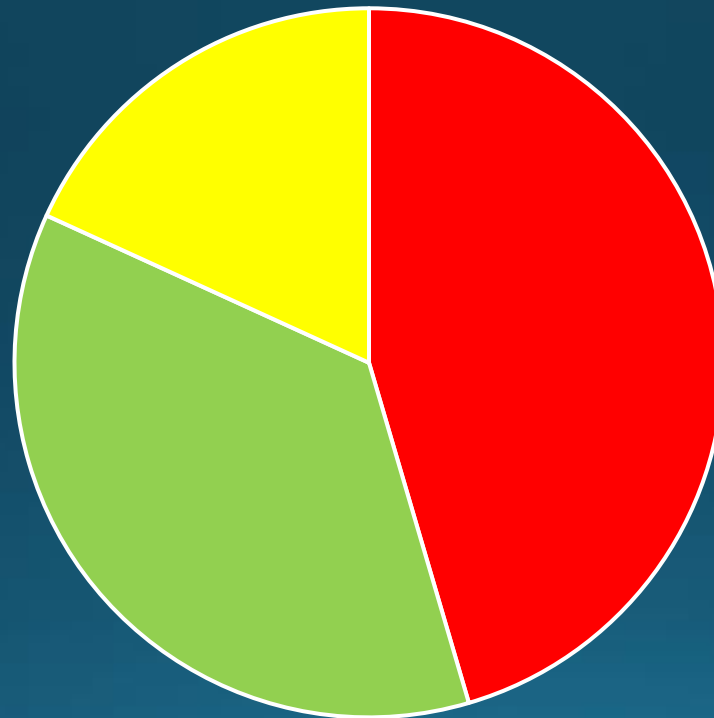
Service evaluation feedback survey:

Attendance at groups



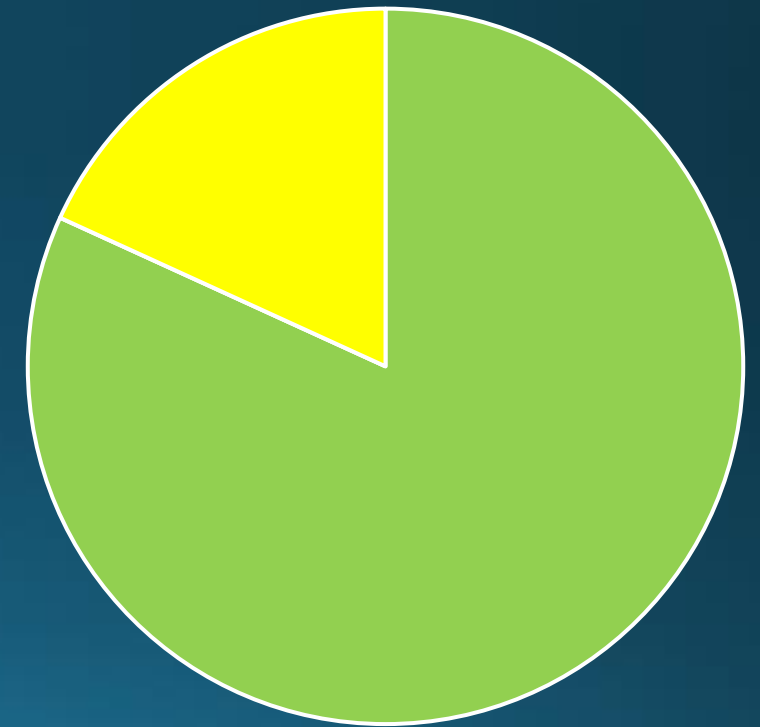
- Very helpful
- Helpful
- Did not answer

Time since discharge



- I did not attend soon enough
- The timing was right for me
- Did not answer

Recommend to others



- Yes
- No
- Did not answer

Selection of comments:

The sessions covered all the relevant information I needed and wasn't aware of, great content and well presented.

It helped by showing that you (as a patient or family member) are not on your own.

Helpful to be able to contribute to the session and meet up with fellow patients who had similar experiences.

Hearing other people's experiences and knowing that there is ongoing support available was helpful.

I found it useful in explaining what I had gone through, that I was normal.

Some people are put off by "group" type sessions however it should be stressed to patients how the groups are not pressured in any way and very much help the recovery process.

This was not the end of the recovery process for me (and others I believe) and if I need help, I would be happy to attend or even be involved in the running of further sessions or groups.

I believe that attending is a great way to increase the rate of your recovery and helps significantly to fully recover.

It was a good reminder of the information I'd been given in hospital.

The assurance that what I felt and been through psychologically was normal and others have gone through it too.

Everything was helpful.

It's lovely speaking to other people sharing their stories and it's very helpful.

They do help a lot! They only spread positive vibes!

It made me focus on my recovery and helped me put what I'm doing into a framework. It also answered some specific questions I had.

I feel that I truly benefitted from taking part.

The handouts covered the main common/shared issues.

A few really good ideas on how to set realistic goals to aid recovery.

I felt I was the only one trying to open the context a bit more and I would have appreciated to see some follow-up conversations from others.

A higher degree of constructive participation by the participants is vital for the notion of "sharing and learning" which is the main purpose, I assumed.

Slightly disappointing that the group was so small (only 2 people) so not a huge chance to compare experiences with others.

I believe a specifically tailored session for follow-up and monitoring for each cohort of participants would be really helpful. After all, we are all keen to see how effective all these efforts are over time.

I was unaware of my surroundings whilst in critical care. To be honest I still remember very little about it! The sessions helped me understand better what went on. What the incessant beeping was about. They also helped me realise that certain conditions in particular delirium was a "normal" reaction to a stay in intensive care.

Conclusions:

- Positive feedback from attendees
- Continue to evaluate to determine the need
- Review ways to improve recruitment
- Aim to offer face-to-face outpatient group alongside current virtual option
- Consider alternative formats such as adding practical exercise sessions, healthy eating advice, smoking cessation
- Create clear pathway for patients to ensure everyone's needs are met

References:

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Thank you for listening

Any questions?

cuh.criticalcarecns@nhs.net

Psychologists: Clare Jackson, Nicola Zapian-Creamer

Occupational Therapist: Joanne Clark

Clinical Nurse Specialists: Joy McAdam, Cat Yates, Jill Hyde,
Robyn Davies, Kate Bartram, Sian Ingham



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