

A Patient's Experience of Critical Care

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This presentation

- Is about how our filmed interview with a former critical care patient came to be made
- The issues associated with the project
- The process required
- The key points brought out in the interview discussions
- How the final film will be used

How the idea arose

- Ken Halligan provided critical care staff at RLBUHT with feed back about his stay
- Joint network conference July 2008
- Ken was asked to present
- Afterwards Ken was asked about possibility of filming in future
- Transcript of conference presentation typed by me and agreed by Ken & his wife

Why did we choose this project?

- Difficulty of capturing patient experience
 - Additional difficulties associated with critical care patients
- Develop additional expertise
- Network resources facilitated project
 - My role
 - Funding (Board approved)
- Network will facilitate access and action

Key points from the Ken's Transcript

- 'Hallucinations which were extended, complex in their narrative and as real as any visual and audible experience that I have ever been through.'
- Need to orientate the patient to time & place
- Importance of natural light
- Need to acknowledge the patient in the bed
- 'Introduce yourself, every time, tell me what you are doing'

Key points from the Transcript 2

- Explain what the noises are for
- 'I have become a 'thing in a bed', something demeaned and incapable. Something - that has things - done to it'
- 'Medical staff often don't appreciate that your family are part of you', 'if the family are not experts on the medical condition they are experts on the patient'
- 'When equipment is attached to the patient, it is part of the patient'

What the project involved

- Communication with Ken over many months
- Ken's agreement
- Finding a film company & suitable venue
- Agreeing with Ken the purpose & principle content
- Agreeing the format of the film
- Finding a suitable interviewer
- Compiling a suitable panel of clinical staff

What the project involved 2

- Steep learning curve!
 - Remotely organising project – & the star player is someone I had met only once!
 - Complex process with many implications
 - New technology
 - New terminology
 - Consulting & co-ordinating experts from other fields
 - Consideration of non NHS participants

Ethical considerations

- Confidentiality
- Consent
 - Ken
 - Panel
 - RLBHHT management
- Background shots, large no's staff involved
- Psychological impact
 - Ken
 - Panel participants
 - Cameramen (& film studio staff)

Key subjects discussed in the film

- Experience within ICU
 - Very short term goals, value of skilled care
- Leaving ICU
 - Ward care, recovering at home
- Memories of ICU
 - Hallucinations, loss of self, of control
- Learning through feedback
 - Communication, AHP input

Personal reflection

- I felt, still feel, responsible for Ken
- Respect of colleagues across professional groups allowed:
 - Consent
 - Co-operation
 - Participation
- Trust in me as project lead & clinical expert
- Support of network team & my mentor
- Editing & final production

Plans for the completed film

- Educational tool
- Learning objectives at various levels
- Local action plans, using transcript too
- Edited into chapters (4 x 25 – 30 mins) for flexibility and ease of use
- Obtainable by formal written request (which will incorporate an agreement as to use) from CMCCN office (phone 01925 843806) after the 1st September 2009 (at cost)

Final point

'Inspiring confidence and aiding recovery, destroying confidence and hindering recovery, communication or the lack thereof is the key'

Ken Halligan, July 2008
