





Contents

Pre-admission information	4
Where will I be staying?	4
Why am I coming?	5
What will be different from where I am?	6
What to expect on your first day	7
What happens next?	8
What to expect during your stay	8
What does a day look like?	9
What do I need to bring with me?	10
What about clothing?	11
What about my family and friends?	12
What facilities are available?	12
What about food?	16
When can I go home and how do I get to that point?	17
have more questions, who can I speak to?	18

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Pre-admission Information

This brochure has been written to give you a brief overview of what to expect from Salisbury Spinal Centre. You will be receiving this if you have been accepted and are waiting for a bed to become available.

We hope that this brochure will help prepare you for your transfer to the centre. Please note your specific care will be tailored to your needs and therefore is not the same for everyone. If you need this information in an alternative format, such as braille or a language other than English, email sft.pals@nhs.net, or telephone **01722 429044 ext 5244**.

Where will I be staying?

The Spinal Centre is located within Salisbury District Hospital. The ward is called Longford Ward and it has 39 beds for acute spinal patient admissions.

It is made up of a mixture of eight side rooms (for infection control purposes), and four or eight-bedded single sex bays.







Why am I coming?

You are coming to us for rehabilitation. Rehabilitation does not mean just physical therapy.

A spinal cord injury affects multiple systems in your body and therefore we take a holistic approach to your rehabilitation. The primary aim of rehabilitation is to encourage you to be as independent as possible and ensure you can manage your bladder, bowel and skin once you leave hospital, so that you can socialise, return to work, and maintain your relationships.

For some this will be working towards being able to fully direct a health care professional in what you need them to do for you. For others it will mean being independent with the majority of your activities of daily living such as washing, dressing, making your bed, managing mealtimes and making drinks etc and everything in between. This is all part of the process for you to regain your independence.

What will be different from where I am?

Spinal cord injury is a complex condition and requires specialist input.

When you arrive at the centre we will need to do our own assessments to be able to make bespoke care plans with you. This may not be the same as you were doing at your previous hospital and can sometimes feel like a step backwards. However, we need to fully establish your baseline so that you can commence the most appropriate rehabilitation plan as soon as possible.



Consequently, our advice may seem strict or strange at times. Here are a few common concerns that can arise.

• Firstly, all people who have a spinal cord injury will have complications with their bladder and bowel. Therefore, on admission you will require a bladder and bowel assessment, including a physical examination. The nursing team will then recommend a management plan which is best for you. This is an essential part of your rehabilitation and needs to be

completed daily to prevent complications. This may be confusing as you may not realise or be able to feel how your bladder/bowel has been affected.

• Second is skin. You will hear this word many times and that is because your skin is at higher risk of developing a pressure sore, particularly if you have poor or no sensation. If you develop a pressure area it's likely the nursing staff will advise you are put on bed rest until it has resolved. This may seem a bit dramatic but the consequences of it getting worse can be extremely detrimental.

If you have no issues, you'll be up all day before you know it. If you have not been up before or have had previous issues then you will likely start on 15 minutes in your wheelchair.

If you have already been up in a wheelchair in your previous hospital for several hours, it is likely we will get you up for one hour and build up your times. Our equipment may be different to what you have been used to and therefore we must monitor you closely to ensure your skin is able to tolerate it.







What happens next?

Within the first 24-48 hours you will be seen by the doctors including your spinal cord injury Consultant, as well as the nursing staff.

The doctors will complete what's commonly known as an ASIA. This is the test that determines your level of injury (you will have had one completed at your previous hospital). They may also discuss your injury with you and tell you what to expect from rehabilitation.

You will also see a physiotherapist and an occupational therapist who will complete some initial assessments which may include looking at your range of movement, your breathing, your social circumstances and measuring you for a wheelchair.

What to expect during your stay

Having been allocated your primary care team i.e., a main physio, nurse etc (but you will meet and be treated by several members of the team throughout your stay) and having completed your initial assessments, you will then be given a weekly timetable.

This will include 1:1 therapy appointments, patient education, group sessions and doctor's ward round information. Your nursing rehabilitation is ongoing throughout your stay and is part of your everyday routine rather than being timetabled.

You will also have regular goal planning meetings with your team where you will discuss your progress, plan achievable goals, and support your discharge plan.



What does a day look like?

Breakfast is served between 6am and 7am to ensure you are ready for any appointments and to give your bowels time to work better.

All lights will be turned on by 7:30am to ensure that the nursing staff can safely administer medications and bowel care from 7:30am.

Afternoon drug round and lunch are between 12:30pm and 1:30pm with supper and the evening drug round arriving around 5pm (these times can vary slightly).

Night-time drug round is around 9:30pm to 10:30pm.

By 10:30pm you will be expected to use headphones if you wish to watch TV or listen to music, so as not to disturb others.

We encourage our patients to have a relatively early night during the week, so that you are rested and ready for your activities the following day.

A typical day

6:00-7:00am

Breakfast served

7:30am

- All lights turned on
- Morning medication and care

12:30-1:30pm

- Lunch
- Afternoon drug round

5:00pm (time may vary)

- Supper
- Evening drug round

9:30-10:30pm (time may vary)

• Nght-time drug round

10:30pm

Quiet time

What do I need to bring with me?

Storage is quite limited around your bed space so please bear this in mind.

Each bedspace has a small wardrobe and a bedside locker. We ask you to bring the necessary items such as clothing and personal devices but please keep other items to a minimum. Each bedspace needs to be fully accessible in case of any medical emergency as well as to enable us to maintain high standards of infection prevention.

Even though our patients stay in hospital longer than most, we do not have space to enable you to have more than minimum personal possessions with you without creating risk to your safety. If family and visitors bring things in for you, we may ask for them to be taken home.





You will not be able to bring any additional furniture into your bedspace. You are welcome to bring your own laptop / tablet at your own risk and use our free Wi-Fi.

As you will be sharing the bay with other patients, we would encourage you to bring anything that helps you sleep and wind down in the evenings (books, eye mask, headphones).

Personal possessions are brought to the centre at your own risk and the Trust has no liability for any possessions that are lost or damaged.

What about clothing?

You will need to bring clothes with you that are comfortable, loose-fitting and with minimal seams and no buttons.

Trousers should have seams at the side rather than down the middle, if possible, to protect your skin from pressure damage. We recommend the following clothing to allow for some to wear, some to wash, and some spare.

- 4 x loose tops
- 2 / 3 x jumpers/jackets
- 4 x bottoms
- 1 x swimsuit (if doing hydrotherapy)
- 1 x pair of shoes (at least one size bigger than your usual size as your feet might swell during the day)
- 1 x pair of waterproof slip-ons (e.g Crocs)

We would encourage you to ask friends and family to support you by bringing other clothes in on rotation.

You will have access to washing machines and tumble dryers on the ward (you need to bring your own washing detergent). The staff will be able to help you with your personal laundry but you will be encouraged to do this independently when possible.

We will provide towels and bedding, which will be processed by the onsite laundry.

You will need to bring your own toiletries.



What about my family and friends?

We operate open visiting and visitors are welcome between 8:00am and 9:00pm. Visiting is in communal areas only before 12:00 noon and after 6:00pm. There is no need to book visiting slots.

There is some accommodation on site for your family and friends to stay in at a reasonable cost, however this is for over 18 year olds only. Availability can be limited so we advise to plan ahead.

There is parking on site for family and friends who travel by car, which is paid for on departure. Car park 7 is the nearest one, located by the spinal unit entrance, opposite the helipad. Alternatively, car park 8 is the main visitor car park. A weekly permit can be arranged with our ward clerk.

Visiting hours 8am-9pm

What facilities are available?

We have lots of facilities here and it is up to you to make the most of them. For example, our gym is open most of the day Monday to Friday and a couple of hours on Saturdays and we strongly encourage you to make the most of this facility between any booked sessions.

There are several spaces away from your bedspace available for you to use. We have a large dining room, where patients are encouraged to have lunch and dinner together. There are a couple of smaller rooms, including a quiet space, a TV room, some games areas, a mini gym, and a multipurpose studio.

In therapy, there is an occupational therapy department, two physiotherapy gyms, a hydrotherapy pool and an Activities of Daily Living flat where you can practice functional tasks such as cooking.







Horatio's Garden is a beautiful sanctuary where you and your visitors can spend time away from the ward, have tea and homemade cake, experience the sights and sounds of nature and join in regular arts and garden activities.

Whether you want to spend time alone, with your family or to meet other people, our garden is here for you and the heated garden room and pod mean you can enjoy it all year round.

The charity's team of friendly volunteers and staff are often on hand to support you should you need it. The garden is located on the ground floor of the centre, accessed via the main lift.





There is a dedicated psychology team located within the centre, which we encourage you to take advantage of, as required.



Our psychology team aims to see patients within a month of their admission, to give time for natural adjustment. In these appointments they will typically gauge psychological input and complete some questionnaires. Psychology is not limited to 1:1 sessions as it also offers awareness of different ways to maintain wellbeing whilst on the ward, through wellbeing groups and informal support.

What about food?

The hospital in-patient menus are carefully designed to provide you with a varied and interesting choice of nutritious, well-balanced and appetising food. You will be expected to choose from the menu each day and where possible complete that yourself.

If you need assistance to do this, please ask one of the staff to help you (example menus shown below). If you have special requests or requirements, the kitchen is happy to support these.

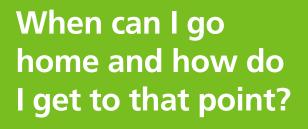
There is also a main restaurant (Springs), two coffee shops (Hedgerows and M&S cafe), a small WHSmith shop plus 24-hour vending machines within the hospital site. There is a vending machine in the main entrance area of the centre.





You will have access to a shared fridge-freezer if you want to bring any of your own food (please ensure this is labelled and in date, as the fridge gets cleaned daily and items will be disposed of if out of date), and you may also keep a small amount of dry food within your bed space but again be mindful that this will need to fit into your locker.





One of the aims of rehabilitation is to allow you to return home (or as close to it as possible) with the skills and knowledge you need to manage your injury.

This means that planning to go home will start soon after you arrive at the spinal centre as there are many factors to consider and put in place.

Your Occupational Therapist and Discharge Coordinator will discuss discharge planning with you and your family, including housing, equipment, and care needs, during regular Goal Planning Meetings.

How long you are at the centre will depend on your needs, but usually this is at least three months.

If your discharge becomes delayed (for example due to housing or care issues) you may need to be transferred to another location nearer to your home, which may include a short-term care home placement.

Returning home

I have more questions, who can I speak to?

Our website has lots of information that may answer your questions and has directions on how to get to the centre:

www.salisbury.nhs.uk/wards-departments/departments/spinal-treatment-centre/

You may also find some useful links and resources on the South West Spinal Cord Injury Network website:

swspinalcordinjury.nhs.uk

If you have any questions about the admissions process, you can contact the outreach team.

Email: shc-tr.acuteoutreach@nhs.net

The Patient Advice and Liaison Service (PALS) offers confidential advice, support, and information on health-related matters.

Email: sft.pals@nhs.net

Telephone: 01722 429044 ext 5244

During your time with us, you will have lots of opportunities to ask questions.

- There are monthly "Discuss It" meetings where you can discuss aspects of your experience as a patient group.
- Weekly "Live It" education sessions cover a wide range of topics regarding living with your injury.
- You can raise any questions or concerns with the nurse in charge at any time.

Support

One thing we recommend doing early on is looking at the specialist spinal cord injury charities. We have provided their contact details (**see page 19**) as they can support you and your families in various ways.

Other organisations you and your family might want to contact earlier on in your journey are the Department of Work and Pensions (DWP) (a rep also visits the unit most weeks) and the Driver and Vehicle Licensing Agency (DVLA) as they can support with claims, benefits, and mobility assessments.





Aspire

Aspire provides practical help to people who have been paralysed by spinal cord injury, supporting them from injury to independence. Their Independent Living Advisors provide advice and guidance to people in Spinal Injury Centres. Aspire can also offer support for housing, welfare benefits, grants and assistive technology.

Website: <u>aspire.org.uk</u> Email: <u>info@aspire.org.uk</u> Tel: 020 8954 5759

Back Up Trust

For over 30 years, Back Up have helped people and their families to rebuild their independence after a devastating spinal cord injury. Their services include telephone support, mentoring, an online forum, residential courses, including wheelchair skills and legal and family support.

Website: <u>backuptrust.org.uk</u> Email: <u>admin@backuptrust.org.uk</u>

Tel: 020 8875 1805

Cauda Equina Champions

Cauda Equina Champions Charity is a patient-led organisation that aims to raise awareness of cauda equina syndrome, support those living with the condition and provide bespoke, tailor-made services for service users and their loved ones.

Website: championscharity.org.uk Email: info@championscharity.org.uk

Tel: 03335 777 113

Spinal Injuries Association (SIA)

The Spinal Injuries Association is a leading UK charity, which provides invaluable support to people who have suffered a spinal cord injury. The charity's support starts from the moment someone becomes paralysed and continues throughout their lifetime. Their services include emotional support including free counselling, community groups plus advice on everything from employment, travel, accessibility, housing, finances and more.

Website: <u>spinal.co.uk</u> Email: <u>sia@spinal.co.uk</u> Tel: 0800 980 0501

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