



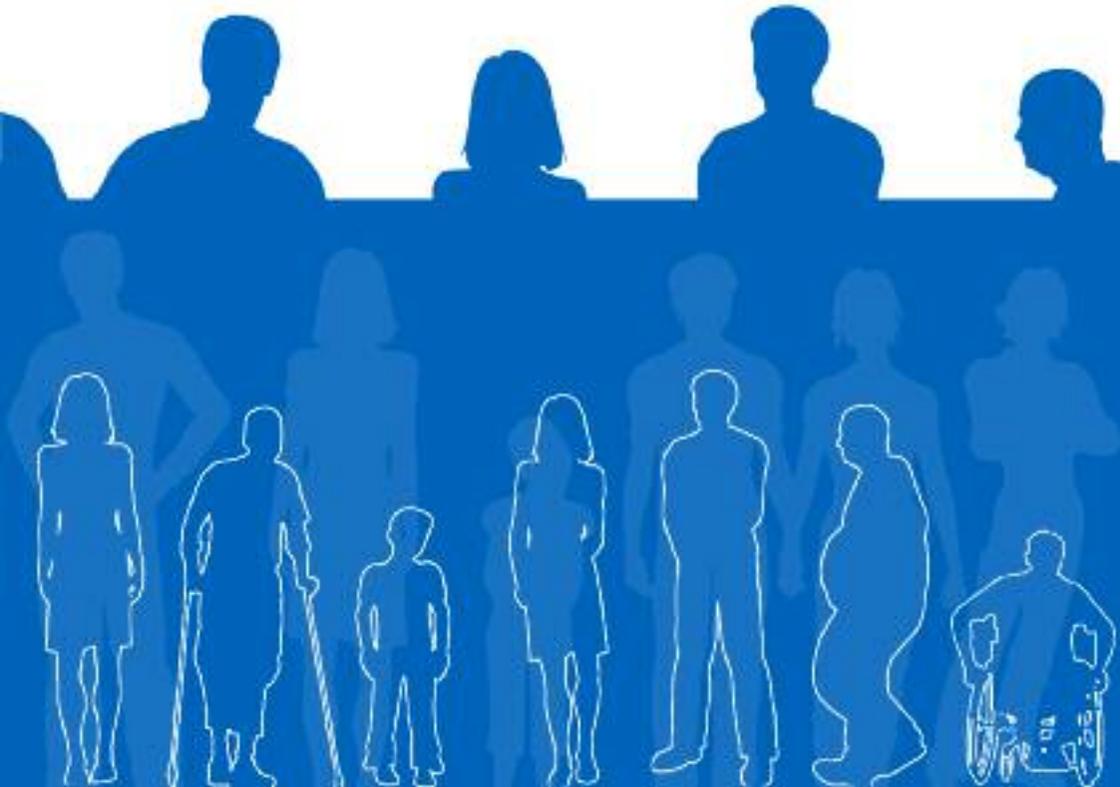
Royal National Orthopaedic Hospital



NHS Trust

A Patient's Guide to the London Spinal Cord Injury Centre

Telephone 020 8909 5583/5588

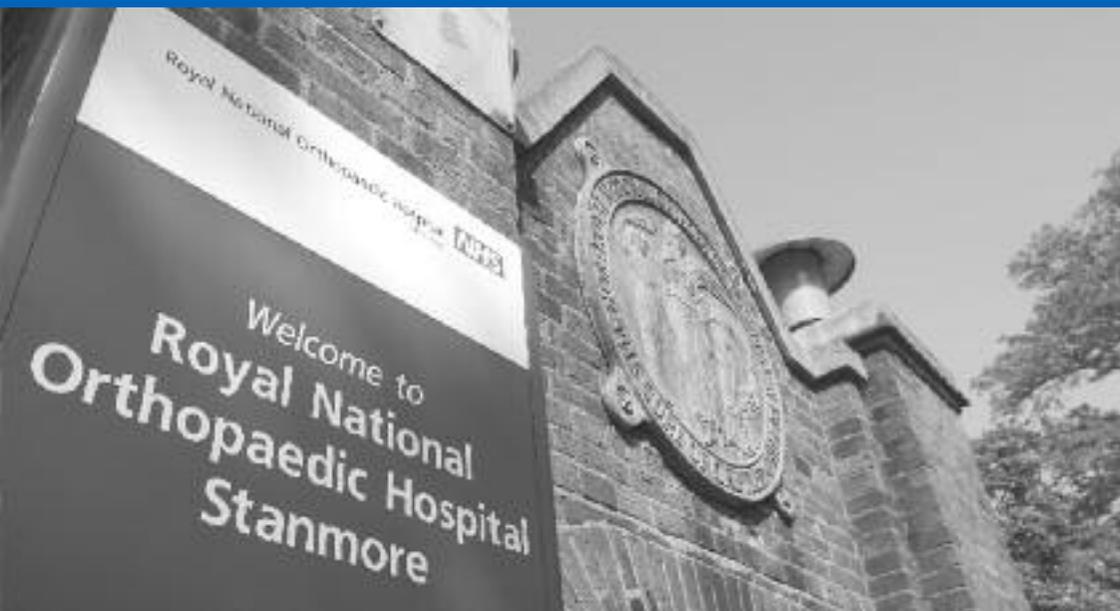


Contents

Welcome to the London Spinal Cord Injury Centre (SCIC) at the Royal National Orthopaedic Hospital	3
Your team	5
The process of care within the SCIC	20
During your stay	25
For your visitors	34
Other useful information	37
Rights and responsibilities	39
Suggestions and complaints	42

Welcome to the London Spinal Cord Injury Centre (SCIC) at the Royal National Orthopaedic Hospital

The Royal National Orthopaedic Hospital NHS Trust (RNOH) is one of the largest hospitals involved in the treatment of bone and muscular diseases and injuries in the UK. In addition to providing a high quality service of specialist treatment, this teaching hospital provides training for doctors, nurses and many other healthcare professionals.



The SCIC was first opened in 1981 and is one of only 11 specialist centres in the UK dedicated to the lifelong service of people with a spinal cord injury. The centre currently has 24 beds comprising acute and rehabilitation beds. The spinal cord injury service also has beds on other specialist wards within the hospital.

The centre has a large spinal research centre, which provides a dedicated clinical research facility to enable the RNOH to undertake research and development into the restoration, rehabilitation and reintegration of people with dysfunction of the spine and spinal cord. Its long term priority is research, focused on improving the management of the injury, and promoting health.

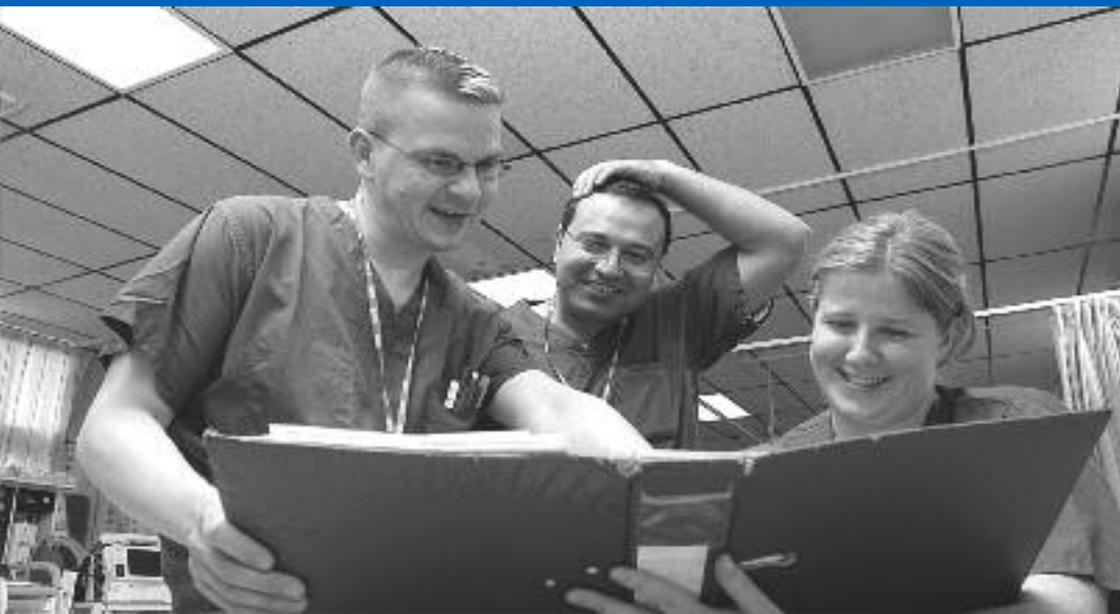
Patients are admitted predominantly from the South East of England on an urgent referral basis. The aim is to admit patients as soon as possible after their injury. The philosophy of the centre is to provide patients with all the information, education, skills and healthcare they require to return to their own community and lead an independent life.

This booklet is designed to give information about the hospital, the SCIC, the facilities, the process of care you will experience and the team of healthcare professionals who will be assisting you during your stay. We hope that you find this information useful and comprehensive. If you find any information is missing or inaccurate, please let us know. [Should any questions remain unanswered regarding any aspect of your treatment or stay with us, please ask the ward manager or any of the staff involved in your care.](#)

Your team

To ensure the highest quality of care, our team comprises a broad range of healthcare professionals who will work with you following your injury, to enable you to be as independent as possible.

To co-ordinate your treatment, team members meet regularly to share information and work to a common purpose.



Community liaison department

Case manager

After your admission, you may be allocated a case manager who is based in our community liaison department. The role of your case manager is to manage and co-ordinate your rehabilitation and your discharge. With your informed consent, they will contact your local community care team so that discharge planning and options for discharge can be explored. They will also ensure that any training or advice necessary for them to assist you when you return home is provided.

After you are discharged from the hospital, your case manager will provide support and advice to you by follow-up visits to your discharge destination and through telephone contact.

Community liaison clinical nurse specialists (CLCNS)

The CLCNS work alongside the case manager and other members of the multi-disciplinary team to ensure that you are supported in the community setting when you are discharged from the SCIC.

The CLCNS are available to provide training and education to carers, nursing and residential homes as well as other healthcare professionals both in the community and in hospital settings. The role entails regular liaison with community teams to increase the knowledge of spinal cord injury in the community and to support both the patient and the team caring for them, whether it be family members or community teams.

An essential part of the role is providing telephone and written support to patients, carers, and outside professionals on the management of a person with a spinal cord injury.

This role also includes ad hoc visits either in your home, nursing/residential homes or in local hospitals.

The CLCNS also co-ordinate the admission of patients to the ring-fenced bed (RFB) for short stays and ensure good use of resources by regular liaison with the teams involved in patient care. The CLCNS attend clinics for all new patients who are referred to the rehabilitation consultants, as well as attending the multi-disciplinary clinics and paediatric review days.

Reintegration practitioners (RPs)

The RPs role is to educate and work with you on the ward to enable you to become verbally independent or to carry out your own care safely. They can also provide the role of carer for overnight stays in the independent living assessment unit, which allows the team to assess your readiness for discharge. As part of your rehabilitation, you can be timetabled to participate in trips away from the SCIC; this may include accessing public transport using wheelchair skills, and exploring your own local environment.

The RPs will also offer advice and information on different activities available to you on discharge from the centre.

Part of their role is to teach professionals and carers in the community how to look after people of all ages with spinal cord injuries, including ventilator-assisted patients. This may involve a 24-hour handover of all your care needs in your home or care home.

Doctor

The medical staff at the SCIC are organised into many teams. The surgical team (consultants and specialist trainees) will be responsible for your acute care, including the initial assessment of your injury and deciding whether any surgical treatment is required. The acute surgical teams carry out a routine ward round each week, which is a good time for you to ask questions about your care and discuss your management.

When the acute phase of your management is complete, the rehabilitation team will assume responsibility for your care, if needed. The consultant will arrange a meeting with you and your family to discuss your injury and treatment. The rehabilitation teams also have consultants, and specialist trainees. The rehabilitation team work closely with the consultant urologists and their team. Consultants from other specialties may be called to assist with your management, if required. The main rehabilitation ward round is on a Tuesday morning; again you should use this opportunity to ask questions and raise any concerns.

Nurse

The nurses' role starts from the time you are referred to the SCIC. The nurses will organise and co-ordinate your admission with the medical team. On arriving on the SCIC, a member of the nursing team will undertake a comprehensive initial assessment. Your specific needs will then be identified and prioritised, to construct your patient-centred nursing care plan. This is evaluated regularly during your acute care and rehabilitation phase. You will be allocated a named nurse who will oversee this process. The nursing team will be present at your goal planning and case conferences.

The nursing team's role is to administer care to encompass your physical and psychological needs. We have developed the Stanmore Nursing Assessment of Psychological Status (SNAPS) to ensure your psychological needs are fully assessed and met, whenever possible. The nursing team's objective is to teach and encourage you to direct your own care. The nursing team will have a major role in teaching you about your spinal cord injury, for example, your skin care, bladder care and bowel care.

Occupational therapist

On your admission to the SCIC, you will be allocated a named occupational therapist. In conjunction with your hospital rehabilitation team and your local community services, they will work with you to achieve maximum independence within the limitations of your spinal cord injury.

Main areas of focus will include (as appropriate):

1. Daily living skills:

- Training and practice in self care and domestic tasks (washing, dressing and cooking)
- Assessment for appropriate equipment to promote independence and the opportunity to practice skills in our independent living assessment unit

2. Functional transfers:

- Training and practice in bed mobility and getting to and from your bed, wheelchair, shower chair, toilet, bath, sofa, car and other transfers for daily living

3. Wheelchair, posture and cushion requirements:

- Trial and assessment for a wheelchair that allows for optimal function with appropriate pressure relief and postural support
- Liaison will take place with your local wheelchair service for provision

4. Hand therapy:

- Assessment of functional potential, maintaining range of movement, appropriate splint provision, training and practice in hand function

5. Communication aids:

- Trial of equipment to aid communication such as telephone adaptations, writing splints, computer keyboard hand splints, mouth-sticks and environmental control units
- We are able to refer patients to Aspire for computer assessments/advice and accessing assistive technology devices

6. Community living skills:

- Advice on returning to work, returning to driving and wheelchair skills such as slopes, kerbs, rough terrain and stairs

7. Environmental modifications:

- Assessing and identifying home/work adaptations in liaison with your community team

Physiotherapist

On admission to the SCIC, you will be assessed by a physiotherapist, who will identify how they may help you.

Initially, this may include management of your breathing and maintenance of your joint mobility and strength. This will occur on the intensive care unit or on the ward.

Working with your named physiotherapist, in groups, in the gym, in the pool, in the sports hall and other environments will help you to improve your strength, balance, fitness and skills, so that you can be as independent as possible.

Your specific goals will be agreed in your goal planning sessions. These are individual and will be affected by your type of injury and other factors. They may include improvement of:

Bed mobility:

- Rolling, moving from lying to sitting and moving around the bed

Transfers:

- Teaching you skills to move from your bed to your wheelchair, from your wheelchair to a car, on and off the floor, and within your environment

Standing:

- Using a variety of techniques and devices to assist you to reach a standing position and enable you to do this regularly

Walking:

- Depending on the extent of your injury, treatment may focus on improving your ability to walk

Mobility:

- Teaching ways to increase your mobility within your environment

As part of the team involved in your care, your physiotherapist will help you with planning your discharge. If you require further physiotherapy as an outpatient after discharge, this will be arranged for you either here or locally.

Rehabilitation assistants

The rehabilitation assistants' role is to encourage rehabilitation activities through therapy, education and leisure activities. Under the direction of the multi-disciplinary team, they also carry over rehabilitation techniques from therapy to the ward and the ward to the community, to assist in maximising progress.

Psychosocial team

Psychologist

The clinical psychologist is available to help you find ways to cope with the stress of being in hospital and the adjustments you may need to make during your rehabilitation. Your partner or family members are included or can be seen separately.

You may be referred to the psychologist for help with specific problems or you may meet informally during the goal planning or group sessions.

The psychologist will encourage you to play an active role in your care and rehabilitation, and will support you in expressing your ideas and your feelings.

Follow-up appointments can also be arranged to support your on-going adjustment.

Liaison psychiatry

A psychiatrist is a medical doctor who specialises in mental health. A liaison psychiatrist has a special interest and expertise in the mental health of patients who have medical or surgical problems, including spinal cord injury.

The psychiatrist may see you to offer support to you and your family or carers to cope with your injury, and make the most of rehabilitation and help with preparation for reintegration in the community.

To help you, the psychiatrist may see you on your own or with your partner or family, with the doctors or other professionals working in the SCIC.

Treatment always involves talking things through. When appropriate, the psychiatrist will recommend medication and give you all the information you require to make a decision whether you want to take it or not.

Some patients require continuing services from community mental health teams after discharge from the unit; where this is the case, the psychiatrist will work towards making necessary arrangements. When the involvement of your local community mental health team is not necessary or appropriate, the psychiatrist will advise you and your GP about further arrangements which may be helpful.

Self help and peer support

There is a small library of self help books and CDs which you or your relatives might like to borrow. Ask a psychologist or volunteer about this. Peer support officers from spinal charities visit the ward regularly to tell you how they coped with their spinal injury, and about what the organisations can offer you. Their newsletters and websites are also available.

Social support

Admission to hospital is a crisis for most people and is usually accompanied by a variety of emotional reactions. Our role includes supporting you and your family through this difficult time in order to facilitate the best recovery and outcome.

Finances may be a source of anxiety and the case manager will ensure that you have access to benefits advice, to assist in your application for Disability Living Allowance and Department of Social Security benefits.

Patient representatives

There are ex-spinal unit patients that attend a managers meeting in the hospital once a month. Their role is to voice current patient issues and concerns and act as a mediator between SCIC ward patients and the management of the ward. Patient representatives are in the hospital and can be seen on the first Monday of every month. There is information in the day room about the representatives, issues from meetings relevant to patients, contact details and how to voice concerns to the management team.

Speech and language therapist (SALT)

The SALT is available to see you if you are having problems with your speech, voice or swallowing. Following assessment, you may be given exercises or specific advice to help these problems. You may be referred

on for further investigations in order to plan your specific therapy programme. You can be seen on a regular basis and may be referred on for further input following your discharge from the SCIC. The SALT may also be involved if you have a tracheostomy and/or require ventilatory support, as these will have an impact on your eating and voice.

Pharmacy

Pharmacy is open from 09.00 to 17.00 Monday to Friday. The department provides a comprehensive medicines management service to all wards and departments.

Ward pharmacy service

During the week, a clinical ward pharmacist visits each ward daily. Their responsibilities include:

- Monitoring of prescription charts for completeness and accuracy
- Helping patients with problems relating to their medicine therapy
- Medication counselling, including discharge counselling on medicines where appropriate
- Provision of information and advice to patients, medical and nursing staff
- Provision of a self-medication programme to SCIC rehabilitation patients if all the criteria are met and locked bedside medicine cabinets are available

If SCIC rehabilitation patients need to go out for any length of time, then they must let the ward pharmacist know well in advance (at least three working days). This will enable the pharmacist to organise medicines to take away (TTA) in time for you to go out and avoid delays or cancellation of the outing due to lack of medication.

Technician top-up service

This service is designed to respond to clinical need, yet ensure effective, efficient and economic distribution of medicines to all wards and departments. Our pharmacy technicians are responsible for distributing these stock items.

Dietician

Nutrition takes a high priority and plays a key role in recovery. The hospital dietician works within our multi-disciplinary team to provide long term nutritional care of patients, promoting healthy eating and education for people on ways of modifying their diet to suit their lifestyle. Advice is also given to both inpatients and outpatients, and diets are tailored to suit individuals' needs. All enquiries are welcome.

Chaplaincy services

Our chaplaincy seeks to offer patients and visitors of any denomination a focus for their spiritual needs. The hospital has an Anglican chaplain on site from Monday to Thursday and a Jewish representative who visits

weekly. Should you desire another denomination representative, please ask a staff member to contact the chaplaincy services to arrange this. For further information on services available, please ask a member of staff for a chaplaincy services information leaflet.

Functional assessment and restoration service (FARS)

FARS and the National Centre for Spinal Research work closely as research is translated into new treatments to restore function. The FARS team are a group of clinical scientists, research doctors and nurses.

FARS therapies include:

- Sacral anterior root stimulator (SARS) implants and assessment for this method of catheterless bladder bowel management
- Male fertility service, including assessment of ejaculation and semen analysis
- Baclofen pump refill clinic

The process of care within the SCIC

Our mission is *"To provide a comprehensive spinal injury service, comprising acute management, rehabilitation and reintegration into the community through research-based clinical practice, by a multi-disciplinary team."*

This lifelong service begins as soon as you are admitted to the SCIC.



Acute phase

When you are first admitted to the SCIC, you will usually be under the care of a consultant surgeon. The emphasis at this stage is to stabilise your general condition and any bone damage that may be present, and to prevent any complications. You will begin to meet many members of your care team during this time.

Rehabilitation

When your spine is stable, you will be able to get out of bed and begin your rehabilitation programme. For some, this may be as soon as they arrive, for others it may be after some days or weeks. At this time, the management of your care will be transferred to a consultant in rehabilitation.

The aim of rehabilitation is to promote independence, self reliance and self esteem.

Your rehabilitation programme will require your full participation for best results. We consider it your responsibility to attend all sessions (or inform the departments if you are unable to attend), participate in your programme and raise any concerns about your programme with a member of your team. Your rehabilitation programme will be based on a system of goal planning. The goals will be set by you and your team. Your case manager will discuss this process with you in detail and will also organise case conference meetings for you.

Case conference sessions are attended by you, any family and friends you may wish to be present, your hospital care team and relevant community care professionals. There is usually a discharge planning meeting held early in your rehabilitation programme. Your discharge date, based on the expected length of time we believe it will take you to complete your rehabilitation programme, will be set at this meeting. This is an estimated length of stay and this will be reviewed at your goal planning.

Rehabilitation is a process involving a number of people and takes place in many settings - on the ward, in the gym, during education sessions, out in the community and during recreation and socialisation.

Social reintegration is an essential part of your programme and it is important for you to spend time away from the unit with your friends and family. The reintegration assistants and reintegration practitioners can organise and accompany you on outings. To ensure you get the most out of your time away from the ward and you are safe, there are forms with a checklist of things you will need to organise prior to any outings. These forms are available from your case manager. If you wish to visit other areas of the hospital, you must tell the nurse in charge where you are going and when you plan to be back. If you do leave the ward, we ask that you return no later than midnight.

Reintegration

The process of discharge planning and reintegration into your community environment begins as soon as you are admitted to our centre. With your permission, a referral will be made to your social services department requesting the allocation of a community care manager, who will be responsible for ensuring appropriate care once you are at home. Your hospital case manager will liaise regularly with the community care manager and also with your GP, district nurses and any other relevant professionals. Your occupational therapist and physiotherapist will liaise with your local services as required.

It is our experience that all patients wish to return to the community as quickly as possible and there is evidence that early return to community living is beneficial in the long term. We work with the community teams to provide good support and a package of care when necessary. It may be that your home is not ready by the time you have finished your hospital rehabilitation programme. In such cases we will explore alternative, short term options with you, within your local community or a temporary arrangement until you can return to your home or a new suitable home is identified. Although your case manager will advocate strongly on your behalf, they do not have any control over how and when services and resources, (for example, housing and equipment) are provided to you by your local teams.

Research

The SCIC together with the National Centre for Spinal Research is actively involved in many studies on different aspects of spinal cord injury. You may be invited to take part in some of this research. All the research programmes are registered with the research and development department at the RNOH and have approval from an ethics committee. The researcher will have plenty of time to explain the nature of the research and you will have time to read a patient information sheet and discuss any queries or concerns you may have to help you decide if you wish to participate.

You do not have to take part in any research and saying no will not affect your treatment in any way. Although you may not benefit directly from taking part, information gathered will help future patients. All new treatments and developments for improving patient care have a base in research. Therefore it is only with participation that progress will be made.

During your stay



Facilities in the SCIC

For your convenience, the ward is an open area; however, this can make the environment less secure. Please bear this in mind at all times and do not leave valuable possessions in sight.

Clothing and toiletries

You will have a locker at the side of your bed for storage of a small amount of clothing and personal items. Unfortunately, space is limited and, therefore, you will need to restrict the amount of personal items you have.

Personal entertainment system

You may bring small portable systems, (for example, TVs, radios and DVD players) with you as long as they are fitted with earphones. Health and safety regulations at the hospital state that these items must be checked by hospital staff prior to their use on the ward. Please remember that noise can be very irritating if you are not feeling well, so consideration for your fellow patients is requested. Headphones must be worn after 21.30. Please remember that the hospital takes no responsibility for the security and maintenance of such items.

Telephone

You are welcome to use your mobile phone, but please be considerate and use this responsibly. If you wish to speak with people during the night, please do so in the reception area and not in the bed area. The hospital telephone number is 020 8954 2300. The ward phone numbers are 020 8909 5583 and 020 8909 5588.

Laundry

A small patient laundry is available in the SCIC to enable you to wash and dry your own items of clothing. Detergents or powder are not provided and the clothes will remain your own responsibility.

Mobile shop

A small mobile shop selling a selection of newspapers, magazines and essentials (mainly confectionery and toiletries) comes to the ward daily.

Banking

Please note that there are no banking facilities on site. The nearest banks are in Stanmore and Edgware.

Ward timetable

You will probably find that the hospital will start and finish earlier than your day at home. Meals are served on the ward at the following times:

Breakfast - from 07.45 until 10.00

Lunch - from 12.15 until 13.00

Supper - from 17.15 until 18.00

If you wish to eat outside these times, (for example, with takeaways), you will have to arrange this with the ward staff in advance. They will not always be available for assisting you with feeding, if you need it, outside of the meal times.

Protected time

12.00 until 13.30 is designated as protected time to allow nurses to carry out assessments and evaluate the care given. This time can also be used for education.

Food

The hospital has a healthy eating policy. Breakfast generally consists of cereals, toast, tea or coffee. For main meals, there are a variety of dishes served each day. To ensure that you receive the meal of your choice, you will be asked daily by the hostess to complete a menu card. If you have special dietary requirements of any sort, for example, vegetarian, kosher, halal or

a special medical diet, please notify the ward staff who will arrange this for you.

There is an information sheet on nutrition that you can request from the ward staff. There are facilities for making a hot drink. [Alcohol is not permitted on the wards at any time.](#)

Vending machine

There is a vending machine in the reception of the SCIC that sells confectionery and soft drinks.

The Spice of Life Café (also known as Broccles)

This is at the lower end of the hospital site.

The cafe is open:

[Monday to Friday](#) - from 07.30 until 19.30 (Hot food finishes at 19.15)

[Weekends](#) - from 07.30 until 14.30 (Hot food finishes at 14.00)

Breakfast is served from 07.30 until 10.00

Lunch is served from 12.00 until 14.00

Supper is served from 15.30 until 19.15

The restaurant serves a variety of hot and cold meals, hot and cold drinks, and confectionery.

Hospital shop (Patients' Centre)

The hospital shop is a large self-service shop in the centre of the hospital site, near the outpatient department.

Opening times:

Monday to Friday - from 10.00 until 16.00

Snack bar and lounge (Patients' Centre)

If you or your visitors feel peckish, the snack bar is open from Monday to Friday from 10.00 until 16.00.

Smoking

The Trust has a no smoking policy in all buildings and grounds on the hospital sites. We will be happy to assist you in stopping smoking if you wish and patches are available. Please discuss this with the ward staff.

Illegal substances

The hospital prohibits the use of illegal substances and will inform the police of the presence of any illegal substance found.

Hairdressing salon (Patients' Centre)

This salon is highly recommended whether for just a trim, shampoo and set, perm, cut and blow dry or a complete restyle at very reasonable prices. You will have to attend the salon in the Patients' Centre; a porter will be arranged for you if needed. The salon is open from 09.30 until 15.30 on Tuesday, Wednesday and Friday.

The Disability Foundation

This is an on-site charity offering conventional and complementary therapies. For further information visit www.tdf.org.uk or contact 020 8954 7373.

Aspire

Aspire is a charity working with people with spinal cord injuries throughout the UK and Ireland. It provides practical support and advice to help people regain their independence.

Their independent living advisors work with patients giving practical solutions to problems that they are facing in key areas such as housing and on-going care needs.

Aspire has accessible houses around the UK, offering temporary housing while permanent accommodation is found and adaptations are complete. Aspire, along with the Karten Trust, has funded the assistive technology computers suite in the Aspire centre. This is free for in-patients' use. Please ask your occupational therapist for more information. Aspire has also provided a mobile computer on the ward for patients' use. Please ask a member of the ward staff if you wish to use this. Aspire has a Human Needs Fund offering grants to people with spinal cord injuries to help buy specialist equipment such as wheelchairs and computer equipment.

For further information about Aspire and all the services available, please contact the Aspire independent living advisor who visits the unit weekly.

Recreational facilities available at the SCIC

Aspire has kindly donated the following items for use:

- A movie time DVD projector, which creates a cinema effect in the day room
- Wii and Playstation 3 with games, which are available for use in the dayroom or at your bedside
- A selection of board games, talking books and jigsaw puzzles

Please ask a member of ward staff to assist you with the use of these systems.

Aspire has installed wireless internet access, which enables patients with a computer and WiFi to log onto the internet. There is also a portable computer system, which can be plugged in at your bedside and is available if you are unable to attend the computer suite in Aspire.

For your visitors



Telephone enquiries

These are welcome, but are more easily dealt with in the evenings. It helps us enormously if one person acts as a link between the hospital and relatives/friends. You can contact the SCIC via telephone: 020 8909 5583/5588.

Visiting

Visitors are welcome on the wards at the following times during the week:

Acute patients from 11.00 until 21.30

Rehabilitation patients from 16.00 until 21.30

Weekend visiting hours for all patients are between 11.00 and 21.30.

(Visiting outside these times may be negotiated with the nursing staff).

Although we try not to restrict the numbers of visitors unless absolutely necessary, we do ask that consideration for both yourself and others is observed. Two or three around one bed fills the space, so please try to stagger your visiting time or take advantage of the other facilities, such as the Patients' Centre or Aspire café. Remember that the work of the hospital must go on 24-hours a day and it may be necessary to ask visitors to wait outside. If, however, relatives or friends have specific requests to visit outside of normal visiting times, please contact the nurse in charge.

Personal mail

Please ensure that personal mail and packages are clearly addressed to you with your name and ward (please see the last page for the hospital's full address). It is advisable that valuable items are not posted to you during your stay in hospital.

Other useful information

There are several organisations that you may wish to contact for useful information. There are some display boards in the main reception area; if you require further information, please ask your case manager.



Aspire: Association for spinal injury research, rehabilitation and reintegration. For further information visit www.aspire.org.uk.

SIA: Spinal Injuries Association (SIA). A peer support worker from the SIA visits the ward weekly and is available to talk to you, should you wish. Please inform a member of your team to arrange a visit. You will also be given a copy of the SIA's handbook on your admission, which contains useful information on all aspects of spinal cord injury. For further information visit www.spinal.co.uk.

BACKUP: A national charity for spinally injured men, women and children who arrange outdoor pursuits and activity courses. They also offer mentoring and practical skills sessions. For further information visit www.backup.org.uk.

ISRT: The International Spinal Research Trust (ISRT) carries out funded research into spinal cord injury. For further information visit www.spinal-research.org.

Internet access: This is available in the Aspire centre and on the ward.

Rights and responsibilities



While you are here, you have the right to:

- Be treated with dignity and respect
- Privacy. Your team members will respect your confidentiality and will only give information to other professionals involved in your care, unless there are specific circumstances where the law requires it to be disclosed to others
- Visitors (although we do ask you to be considerate with the time and numbers)
- Have quiet time after 22.00
- A clean and tidy environment
- Use a mobile phone in your own time within the unit, with due courtesy to other patients

We consider it your responsibility to:

- Consider the needs of other patients, particularly with regard to noise and space
- Ensure you are able to attend all your appointments or send a message when you are unable to do so
- Inform staff when you are going out, as you will be required to sign out formally
- Take care of equipment that is loaned to you
- Have appropriate clothing, footwear, etc. to participate fully in your rehabilitation programme. If this is difficult, please inform a member of staff, who will be able to assist you
- Bring in headphones to use your entertainment systems after 22.00

- Keep your own area clean and tidy
- Uphold the alcohol and illicit substances policy

Failure to participate fully with your rehabilitation programme will lead to a review of your admission, although this will not jeopardise any care you require from our service in the future.

We acknowledge that admission to hospital can be stressful and a rehabilitation programme can be challenging. However, verbal or physical aggression towards staff or others cannot be tolerated. It will be taken very seriously and certainly lead to your admission being reviewed.

Thank you for your time in reading this and for your anticipated co-operation. We hope that it assists you during your admission.

Suggestions and complaints



Questionnaires

As part of our ongoing development, we may ask you to fill in a questionnaire at various stages to evaluate different parts of the service. Your co-operation with this would be appreciated. We also welcome informal feedback and attempt to ensure on-going improvements and development of our service.

PALS

The patient advice and liaison service offers support, information and assistance to patients, relatives and visitors. You will find information leaflets in the reception of the SCIC.

Say So campaign

The Trust aims to offer you the best possible service. Please help us to do so by giving us your comments on the standard of care we provide. Leaflets are available in the SCIC reception.

Formal written complaints should be sent to the customer care manager at the hospital address or you can ask staff to contact the customer care manager on your behalf and request an appointment. You can also contact them yourself on telephone number 020 8909 5717.

Please note that this is an advisory leaflet only. Your experiences may differ from those described.

If you have any comments regarding this leaflet please contact the clinical governance department on 020 8909 5339.

Royal National Orthopaedic Hospital NHS Trust
Brockley Hill
Stanmore
Middlesex
HA7 4LP

Tel: 020 8954 2300

www.rnoh.nhs.uk

RNOH_PG_LSCIC © RNOH October 2009

Author: London Spinal Cord Injury Centre multi-disciplinary team

If you need this document to be translated into another language/large print, please contact the clinical governance department on 020 8909 5439.

إذا كنت ترغب في الحصول على نسخة من هذا المستند
مترجمة إلى لغة أخرى/مطبوعة بخط كبير، رجاء الاتصال
بقسم الإدارة الكلينيكية على الرقم
5439 8909 020.

Bu belgenin başka bir dile/büyük baskıya tercüme edilmesine ihtiyacınız varsa, lütfen Klinik Yönetim Departmanı ile temasa geçiniz: 020 8909 5439