





Basildon University Hospital - Critical Care Unit (CCU)

Much is being done at Basildon University Hospital on the Critical Care Unit to manage effective change. It has been about utilising our nursing resource on the ward, in such a way that it becomes more effective by improving efficiency and safety. RITA has been the medium to help support that change. Below are actual feedback comments from nursing staff on the ward and how the introduction of RITA has helped to provide that level of support. We obtained feedback from 30 nursing professionals which included, Senior Sisters, Staff Nurses, Physio's and their experiences of utilising RITA as part of their daily work.

It is a consistent message throughout the feedback that this medium has been positive is supporting the ward. Their comments are noted below.

Summary	Action	Outcome
We have number of patients on the ward who have delirium and dementia. They can become agitated and bored.	We played the Movies, Music and Activities.	Patients became more relaxed and settled. They smiled as they watched movies and listened to hymns. Because they were occupied, we have been able to manage our time and carry out other nursing duties, medication, stoma care etc.
A patient who has delirium was agitated, bored and walking with purpose. They would pull on their 'lines'	Played the patient's favourite music	We were able to engage the patient in rehab. She stopped pulling on her 'lines. We would not have been able to carry our rehab without this intervention.
Physio found it difficult to get the patient to carry out rehab exercises.	The Physio selected the cycling video.	Patient engaged well. He kept pace with cycling during rehab. It distracted from the effort. It improved engagement and rehab and improved compliance in rehab. Because of the positive interaction and commitment, it contributed to an effective and positive rehab. The feedback was that "it was marvellous".

Summary	Action	Outcome		
EOL with relative present.	The Husband of the dying patient requested music from the Carpenters, which we were able to play by the bedside.	Because we were able to specify specific music on the RITA system, we managed to find this music, which was their favourite. The Husband was grateful and was comforted at this difficult time. RITA has so many activities that are able to meet both emotional and psychological needs of patients and families.		
Non English speaking patient 1. Dementia and Delirium present. Extremely violent, aggressive and Falls Risk.	Patent was confused and speaking Romanian. Managed to introduce music to settle the patient.	Patient became settled and allowed us to look after her and assist with personal hygiene. We found the ability to use the translation tool within the system excellent.		
Non English speaking Patient 2. Bored and agitated.	We used the translator to help engage in activities.	Patients was happier, we were able to keep his spirits up, trying to understand his needs through the translator.		
Non English speaking patient 3. Dementia/Delirium	Introduced translator to communicate the treatment plan and nursing procedures. We were able to ask the patient about his needs.	Effective use of RITA. Patient became much more settled.		

Senior Evaluation of the Impact of RITA								
Scenario	Releasing time to care for 1:1	Increased staff interaction with patients	A positive impact on the general feel of the ward	Reduction in patient safety issues	Patients are more settled in the daytime	Patients are more settled at night		
Delirious/Confused Patients on Critical Care Unit 1:1 Care	Yes	Yes	Yes	Yes	Yes	Yes		
Bored Long Stay Patients on Critical Care Unit & 1:1 Care on Step Down	Yes	Yes	Yes	Yes	Yes	Yes		
Bored Patients on Critical Care Unit 1:1 Care	Yes	Yes	Yes	Yes	Yes	Yes		
Delirious Patients on Critical Care Unit 1:1 Care	Yes	Yes	Yes	Yes	Yes	Yes		

In conclusion and following these final evaluations, it was acknowledged that RITA freed up valuable staffing resource. It afforded an opportunity for nursing professionals to manage their time more effectively. The ability to deploy RITA as a means of settling, calming and stimulating patients negated the need for a lot of 1:1 care. Nurses were able to provide essential nursing duties and the calming influence of RITA often helped with the administering of essential medication and lines.

RITA promoted a healthy sleep awake pattern, having more patients awake during the day, reducing the 'wandering with purpose' and incidence of falls at night.

The translation tool has been valuable when understanding the needs of non English speaking patients and providing the patient with confidence and reassurance.

Staff morale is improved as they have more time to carry out those duties essential to their role.











