NHS
University Hospitals Sussex
NHS Foundation Trust

The Critical Care Unit
at the Louisa Martindale Building

Leaflet QR code

Patient information

Contents

What is this information about?

This information tells you about the Critical Care Unit at the Louisa Martindale Building. It can be frightening when your relative is admitted to Critical Care, but we are here to help you.

This information includes practical advice about visiting your relative, including what to expect when you see them. It also tells you about the team who are looking after the patients in Critical Care.

It also lists resources where you can find more information and support while your relative is staying on the unit, and once they are home.

We hope this information will answer some of your questions, but please feel free to discuss any worries or problems you may have with a member of our nursing staff or medical team.

What does the critical care unit do?

The Critical Care Unit is a department for very ill people who need constant monitoring, treatment and special care for serious illness or major injuries. This includes head injuries, trauma or care after an operation. They may also need the support of a breathing machine called a ventilator.

There are more staff here than on a general ward. One nurse will look after one or two patients depending on their needs. There are always doctors and a consultant on duty.
Doctors and nursing staff on this unit have had lots of training so that they can give the high level of care that is needed.

The Critical Care Unit in the Royal Sussex County Hospital is split into three areas.

The A and B areas are for general critical care. C area is for neurological (head injury) and trauma care. Be aware, patients can be looked after in different bed areas if their needs change or if there is a shortage of beds, but the standard of care will always be the same.

Patients on A, B and C areas are looked after by the same medical and nursing team, which includes pharmacists and physiotherapists.

Different genders are nursed next to each other on the unit. This is because we have to look after people according to their clinical needs, not their gender. But every effort is made to make sure that they have privacy and dignity.

What happens when my relative is taken to Critical Care?

When someone first comes into Critical Care, it can take more than two hours for the doctors and nurses to assess their condition, attach them to special equipment, insert lines or tubes to give them medicine, and make them as comfortable as possible.

We appreciate that you will be anxious to see your loved one and it can be frustrating to wait for news, but it is important that Critical Care staff stabilise their condition.

A member of staff, the doctor or nurse will discuss your relative's illness, treatment, and plans of care with you as soon as possible.

When can I visit?

Our visiting times are from 10am to 8pm, and we allow two visitors at a time. You may be able to visit outside of these times, but please discuss this with the team looking after your relative first.

When you do visit, please be aware that our priority is caring for your relative and there may be some occasions when you will have to wait to be able to see them. This is because we are attending to their immediate nursing and medical care needs. We have relatives' rooms for you to wait in and we appreciate your patience and understanding.

Who can visit?

- Visiting is limited to immediate family or close friends. Lots of visitors can be tiring.
- We do not recommend bringing children or babies unless there are exceptional circumstances. Please discuss this with a member of the team looking after your relative.
- Visitors are restricted to two per patient, to minimise any disturbance and the privacy for other patients.
- Please respect the privacy and confidentiality of other patients in the unit. All patients have the right to this.
- You may be asked to wait outside during doctors' ward rounds and nurses' handover.

What can I expect when I see my relative?

They may look different. They may be attached to lots of machines and are likely to have drips and lines in their neck or arms. These are to give medicine and monitor their condition. They may also have tubes in the nose, for example, a feeding tube.

You may see many different pieces of equipment by their bed. Some of the equipment might help with breathing (like a ventilator), giving medicines, or monitoring blood pressure or heart rate.

Your relative may be wearing an oxygen mask or they may have a special tube in their mouth, nose or throat to help them breathe.

They may look swollen, or may have lost some hair, which is common in very ill patients.

Most patients have a urinary catheter, and some may have surgical drains.

There may be beeping noises or occasional alarm sounds from the machines. This is normal and does not necessarily mean that something is wrong. The nurses will explain the machines to you if you would like them to.

It may be very distressing for you, but all of this is a necessary part of patient care.

Can I touch my relative?

Yes. Although there are tubes, wires, and equipment, do not be afraid to touch them. You may want to hold their hand and the nurse will show you how to do this safely.

Can I talk to my relative?

Yes. Feel free to talk to your relative and let them know that you are there. They may hear you even though they seem unable to.

Patients in critical care are often unconscious, at least during the early part of their treatment. This may be because they are given drugs to make them sleepy and comfortable. But it is possible that they can hear, even if they cannot respond. Nurses and doctors often talk to unconscious patients to tell them what is happening.

A patient diary is started when your relative stays with us in critical care. The diary provides a story of their stay in critical care and is separate from their health records. The diary is usually given to the patient when they leave the Critical Care Unit, or the hospital.

This can help to fill in missing memories for your relative during their recovery. It can also help you to look back and see small improvements that they have made.

Patient diaries are updated daily by the nurse, physiotherapist, and other team members, and also relatives and friends. Please talk with the nurse at the bedside if you wish to write on this diary.

Can I get involved in my relative's care?

The nurses are quite happy to let you help care for your relative. If you would like to help care for your relative at any stage, please feel free to ask. This may include helping with washing, performing mouth care, eye care, shaving, hair care and foot massages.

If you want to help with eating and drinking, please ask the nurse looking after your relative first. Their condition can change so please check each time if it is safe for them to eat and drink.

You can bring in food or drink for the person you are visiting. Please make sure that everything is wrapped or covered and labelled with name and date.

We have a fridge that personal food can go in.

We are sorry but we are unable to reheat any food.

Will I be able to ask about my relative's condition when I visit?

Yes, we are happy to give you information when you visit.

If you want to speak with a doctor, please ask a member of staff to arrange this for you.

We know that during times of stress and anxiety it is easy to forget things. You may find it helpful to write down any questions you want to ask the doctors or nurses: please do not hesitate to repeat your questions at any time.

Who is looking after my relative on the Critical Care Unit?

Patients are looked after by the Critical Care Team. This includes:

Doctors

Patient care is led by a large team of critical care consultants. These are specialists in intensive care medicine. You may meet different consultants, but they will all be given detailed notes about your relative's health. There is one consultant for areas A and B, and one for area C. They are supported by doctors who are in training.

Matron

Our matron is a nursing sister with lots of experience in intensive care. Matron makes sure that staff follow set guidelines and policies to give patients the best care. Matron wears a blue uniform with purple piping and is available to speak to if you have any concerns about patient care.

Advanced Critical Care Practitioners (ACCPs) and Trainee ACCPs

The ACCP and Trainee ACCPs are specialised clinical professionals responsible for patient care during their Critical Care admission. ACCPs are developed from experience nurses, physiotherapists, paramedics or other related health care professionals. They are led by the Critical Care consultant and work within medical team.

Nurses

We have a senior nurse on each shift. We have staff nurses who look after one or two patients depending on what the patients need.

Nurses are supported by critical care nursing assistants and specially trained health care assistants.

Critical Care Outreach Team

The Critical Care Outreach Team (CCOT) are a team of experienced senior nurses who are specially trained to provide support to patients outside the Critical Care Unit. The team works closely with nurses and doctors, and the critical care team to make sure you are given the best possible care.

The CCOT are based in the hospital and can be contacted by the medical and nursing teams looking after you 24 hours a day. For further information about us please visit: https://www.uhsussex.nhs.uk/resources/the-critical-care-outreach-team-information-for-patients-and-their-relatives/. For Call for Concern Service information please use the link: www.uhsussex.nhs.uk/resources/are-you-concerned-about-a-patient-2/

Clinical psychologist

A critical care psychologist supports the psychological and emotional well-being of ITU patients and their families. If you or your loved one is receiving care in critical care, here's how a psychologist can help:

For Patients:

- Emotional Support: Coping with the stress and anxiety that can arise from being in a critical care environment.
- Managing Psychological Symptoms: Addressing feelings of depression, fear, or trauma related to your illness or treatment.
- Improving Communication: Helping you express your needs and concerns to your healthcare team and loved ones.

For Families:

- Guidance and Support: Assisting family members in understanding and coping with the emotional impact of a loved one's critical illness.

- Facilitating Communication: Ensuring clear communication between family members and the healthcare team to help with decision-making and emotional support.

Psychologists work closely with the entire medical team to ensure that your emotional and psychological needs are met alongside your physical care.

Dietician

When you are very unwell, your nutritional needs can change. Critical care dietitians make sure that patients get the right nutrition if their condition changes. If someone cannot eat or drink, the dietitian can give them nutrition through a tube into their gut, or into their blood supply if this is not possible.

Pharmacists

The pharmacists make sure that medication prescribed is accurate, appropriate, and safe to use. The pharmacists advise the medical team on the ward round.

Physiotherapists

Our team of physiotherapists assess the patients regularly and identify areas which need to be treated.

Physiotherapy consists of optimising patients breathing through helping to expand the lungs and clear secretions. We aim to make breathing less effortful and more efficient.

Physiotherapy also involves rehabilitation. We regularly complete muscle and joint stretching exercises to prevent loss of movement, and progress to active muscle strengthening exercises as able. This may involve us assisting patients to sit on the edge of the bed and transfer into a chair or using aids for movement such as walking frames or tilt tables. We will work with patients focussing on their individual goals to promote movement and independence.

Specialist nurses

We have nurses who are expert in different areas, such as pain control, stoma care, wound care and diabetes.

Speech and language therapists

It is common for patients in intensive care to have difficulties swallowing or communicating. Speech and Language Therapists help patients to communicate and eat and drink safely. They also advise the healthcare team when making decisions about the patient's airways.

Technician

Critical Care has a specialist technician who maintains the equipment, trains staff how to use it and replaces it when necessary. The technician is supported by three technician assistants.

Other members of the team

These include our Data Team, Office Manager, Ward Clerks and Domestics Service Team.

How do I identify staff?

All staff wear a badge, so you know if someone is a doctor, nurse or other member of the team. Everyone in the unit should introduce themselves.

How do I get into the Critical Care Unit?

If you are visiting the A and B area, there is a member of staff at the reception desk from 12pm to 8pm. Before or after these hours please use the phone next to the desk and dial **Ext. 67927.**

When visiting area C there is a video entry system. Please ring the bell and wait until we can answer.

Staff will let you in as soon as they can, but there may be some delay answering the door because they are busy with a patient.

Can I, or a member of the family, telephone the Critical Care Unit to get an update?

Yes. Please nominate a family member who can call, and then pass information on to the rest of your family. This means that the nurse caring for your relative will not be called away from them too often.

Please be aware that nursing staff cannot give out detailed information over the telephone.

Please use these numbers to contact us:

A and B area

Beds 7 to 17: 01273 696955 Ext. 67253
Beds 18 to 29: 01273 696955 Ext. 67472 or 67270

C area

Beds 43 to 56: 01273 696955 Ext. 63261 or 63824.
Alternatively, please ring the Critical Care Main Reception area. This area is staffed from 12pm to 8pm.
Call: 01273 696955 Ext. 62258.

You can also ring the hospital switchboard on 01273 696955.
Ask for Critical Care Level 7 at the Louisa Martindale Building.

Can I use my mobile phone while I am on the Critical Care Unit?

Please speak to a nurse if you need to use your phone.

Please do not take any photos while you are on the unit, until you have asked permission from a member of staff.

How can I help to reduce the risk of infection on the Critical Care Unit?

Patients who are in the Critical Care Unit are more at risk of getting an infection. So, it is important that everyone does what they can to stop the spread of germs. **There are things that you can do to help:**

- Do not visit if you are feeling unwell
- Please make sure you use alcohol gel on your hands before entering and leaving the unit.

- An alcohol gel dispenser can be found at the patient's bedside and at all entrances and exits. Using the gel will help to reduce the risk of infection.
- Please wash your hands with soap and water if you are unable to use alcohol gel.
- If your relative is being nursed in isolation, speak with a nurse before entering the room.
- Fresh flowers are not allowed in critical care unit as they can be an infection risk.
- Please do not sit on the patient's bed.
- Visitors are not to eat at the bedside or in clinical areas. Drinks are allowed at the bedside, but these must be covered for safety reasons.

Research in the Critical Care Unit

The Critical Care Unit is part of a teaching hospital and major trauma centre. Research is very important to us.

Patients and relatives may be asked if they would like to take part in research. The research nurse will contact you about this.

The research nurse sees if patients are suitable for various studies and makes sure that we conduct the studies in accordance with the Good Clinical Practice Guidelines. All research is ethically approved by an independent committee of experts to protect our patients' best interests.

Any data which is collected during research is anonymised. It goes back to the study's Chief Investigator and team. They will study the data, write about it, and publish the results in a medical journal.

What are ward rounds?

Ward rounds are led by the critical care consultant every morning, usually starting between 8.30am and 9am. There is another in the evening, and then one during the night shift.

Each patient's progress is discussed, and a treatment plan reviewed. The ward round may take up to five hours or more, as all the patients are seen.

What personal items does someone need while they are being treated in Critical Care?

Clothing and valuables

We do not have a lot of space, so please do not bring too many possessions. The Trust cannot accept responsibility for loss or damage to any valuables not handed in for safekeeping. Please do not bring things that are expensive or valuable.

Most critically ill patients are more comfortable when they are nursed in their hospital nightclothes rather than their personal nightclothes. If we need these, we will ask you to bring them later.

Personal items and toiletries

Patients may like to have their own personal items and toiletries such as:

- Deodorant or perfume.
- Hairbrush or comb.
- Shaving equipment, shaving cream.

- Dentures, spectacles, and hearing aids.
- Postcards and photographs of relatives and friends.

Do feel free to bring any other toiletries the patient may like.

Cards and letters may be sent and will be left for a relative or friend to open when visiting.

It may be helpful to us if you bring in a photograph of your relative, as critically ill patients often look quite different than before they were ill.

How long will my relative need intensive care?

The length of stay in Critical Care may be from a few days to weeks.

It is hard to predict as a patient's condition may improve or deteriorate quickly, and each patient responds differently to treatment.

Our medical and nursing teams will give you as much information as they can and update you regularly about the patient's condition.

At times it may be necessary to transfer a patient at short notice. A transfer is usually to another ward in the hospital, but on rare occasions it may be to another hospital.

The reason for a transfer could be to make it easier to give the patient more specialised care, or to make room for an emergency admission. The decision to transfer patients is always made by the critical care consultant, as patient care and safety are of paramount importance. We will make every effort to tell you about a transfer beforehand.

Practicalities when visiting the hospital

Bus

The Royal Sussex County Hospital is in Eastern Road, Brighton, and is served by buses 1, 1a, 7, N7, 14B, 14C, 23, 27C, 37, 37B, 47, 52, 57, 71, 73, 94A, 271, 272. They all stop outside the hospital.

Parking

The multi-storey car park is on North Road within hospital grounds. This multi-storey is a pay-on-foot car park. Parking is limited and waiting times can be up to an hour. Pay-and-display parking is available in surrounding streets.

The underground car park for the Louisa Martindale building is accessed from Bristol Gate by taking the first left.

If you will be visiting for longer-term, you can apply for weekly car parking passes, but our parking areas are very limited. Please speak with the members of the critical care team.

Taxi

There is a taxi rank in Paston Place opposite the hospital, and a free taxi-phone near the reception desk on the ground floor of the Louisa Martindale building.

Train

The nearest station is Brighton, which is about a 40-minute walk from the hospital.

Facilities

There are two visitor areas. There are chairs, a sofa, vending machine for drinks, and visitors' toilet. There is also a water dispenser.

We have several interview rooms located on each unit. These small rooms are used for the medical team to speak with relatives privately, these are not waiting rooms.

Can I stay overnight?

We understand that you might like to stay with your relative most of the time, but don't underestimate the stress on yourself. It is important to acknowledge that your relative will need your help when they are getting better. We also want to make sure that patients get their rest.

In special circumstances staying overnight may be needed. This would be discussed with the nurse in charge. In this case you would have to stay in a waiting room, as critical care does not have visitors' sleeping accommodation.

If you do stay overnight, please do not visit the clinical area unless you have talked about this with the nurse in charge. This is to make sure that all of our patients get enough rest and sleep.

Shops and hospital services

There is a WHSmith selling Marks and Spencer's food on the ground floor of the Louisa Martindale building (entrance on Eastern Road), opening hours: 7am to 8.30pm Monday-Friday and 8am-7pm Saturday-Sunday.

Peabodys coffee and take away outlet on the ground floor in the Louisa Martindale building, opening hours: 7am to 8pm Monday-Sunday.

There is a Subway adjacent to the Royal Alexandra Children's Hospital and is open seven days a week: Monday to Fridays 7am to 7pm and weekends from 8am to 4pm.

The Terrace Restaurant is on the third floor of the Audrey Emerton Building, on Eastern Road, next to the Eye Hospital. Open Monday to Friday 8am to 2.30pm.

A WRVS café is on Level 5 of Thomas Kemp, adjacent to the Accident and Emergency Department, there you can buy hot and cold drinks, light snacks, rolls and sandwiches.

A WRVS café and WHSmith are on the ground floor of the Royal Alexandra Children's Hospital.

Where can I get further advice and support?

Visiting the Critical Care Unit and coping with the experience may be very tiring and difficult for you. It can be helpful to speak with someone about what you are going through. Fear and the unknown can cause anxiety. Please ask our staff if something is worrying you.

It is understandable to be worried about your loved one, but it is important to take care of yourself. Try to get rest as often as you can and try to sleep during the night, not the day. Remember to eat sensibly too. You will need your strength.

Chaplaincy and Spiritual Care Department

Spiritual and religious beliefs might be important to you and your relative.

A hospital chaplain is available for support and prayers. The chaplaincy can also contact the local clergy of a different religion.

If you wish to speak with a chaplain or you would like a chaplain to visit your relative, please let the nurse know, or you can contact them directly. The chaplaincy team is in 'The Sanctuary' on level 6, The Louisa Martindale building. They can be contacted on **01273 696955, extension 64122.**

What if I want to make a suggestion, comment or complaint?

We always welcome suggestions. It is important that any problems or difficulties are dealt with quickly, and at an early stage. This includes any comments and concerns that are related to staff on the ward.

We always aim to improve our services so that we can give our highest standard of care. Please could we ask for your support in completing the feedback form the friends and family test. Feedback and suggestions can help us to improve our services and provide better care for patients. Paper copies are available in the waiting areas and can be posted in the metal suggestion boxes, or you can scan the QR code available.

The Patient Advice and Liaison Service (PALS)

The PALS team provides confidential advice and support, helping you with any concerns about the care provided and advising on different services available from the NHS. PALS are a 'here and now' service and hope to be able to resolve concerns as soon as possible.

They can be contacted on **01273 696955 Ext. 64511.**

Website: **PALS – University Hospitals Sussex NHS Foundation Trust**
www.uhsussex.nhs.uk/patients-and-visitors/support/pals

Interpreter and Communication Services

If you find communication difficult because you are a non-English speaker or have hearing impairment, please speak to a member of our team and we will arrange an interpreter for you.

What happens after someone leaves critical care?

Patients are discharged from critical care to a general ward once the medical team decide they no longer need close observation.

Moving to a general ward is for many patients a very important step forward in their progress to recovery. However, during this transition, some patients might feel anxious, insecure, or isolated. This is natural as patients have got to know the critical care staff and become used to the security of being cared for by one nurse. Be assured that your relative will soon get to know the ward staff and the ward routine.

On the ward there will be less staff, equipment, and fewer procedures than in Critical Care, as your relative will no longer need the previous level of support. The ward staff recognise that a patient who has been critically ill may need extra help as they are weak and may tire easily.

The Critical Care Team (medical team, nurses, and physiotherapists) will identify and discuss with your relative any physical or psychological problems and their rehabilitation needs before they leave the Critical Care Unit. Ward staff will receive a comprehensive handover about your relative's health status from the team.

Soon after discharge from critical care unit, your relative will be visited by one of the Critical Care Outreach team, who can answer all outstanding questions about the stay in critical care. A Critical Care Outreach nurse will assess your relative's care needs and collaborate with nursing staff to make sure that all patient needs are met.

If you have any concerns at this stage, please tell a member of the nursing staff immediately.

Will we still have contact with the Critical Care Unit after my relative has left hospital?

Yes. There will be a follow-up from the ward's medical team. If your relative has been in critical care for more than three days, we will contact them two to three months after discharge from critical care with details of the Critical Care follow-up clinic.

The purpose of the Critical Care Unit follow-up clinic is to monitor your relative's progress and recovery at home. Your relative may have ongoing physical problems or feel low or more anxious than usual. The clinic offers the opportunity for your relative (or other people in their family) to discuss any problems and to ask any questions about the stay in critical care. The appointment will last for about 30 to 40 minutes.

Our email address: uhsussex.criticalcarefollowup@nhs.net

If someone dies

Unfortunately, not all patients will survive.

Death of a loved one is always a devastating event, even if it was expected. Sometimes there is little warning before someone dies, and there may not be enough time for the family to return to hospital.

We will always aim to make your relative comfortable and prepare them for a peaceful and dignified death. During this time, we will try to give you and your family as much support and privacy as possible. This support may include the help of specialist nurses, whose role is to ensure the patient's end-of-life wishes are carried out.

Additional support is available from the hospital chaplaincy and bereavement team, who are able to provide spiritual support for most religions. Please ask a member of staff to contact them for you.

Other contacts

ASSIST Trauma Care

Help and support for people affected by severe trauma.
Helpline: 01788 551919
Website: www.assisttraumacare.org.uk

Asthma + Lung UK

A charity dedicated to improving the health and wellbeing of people in the UK whose lives are affected by lung conditions and asthma.
Helpline: 0300 222 5800
Website: www.asthmaandlung.org.uk

Brake

A road-safety charity helping seriously injured accident victims and their relatives or friends.
Helpline: 0808 8000 401
Website: www.brake.org.uk

British Association for Counselling and Psychotherapy

For details of counsellors and psychotherapists in your area.
Phone: 01455 883300
Website: www.bacp.co.uk

British Heart Foundation

A charity that offers support and gives information on the health of your heart.
Helpline: 0300 330 3322
Website: www.bhf.org.uk

Carers Trust

Carers Trust is the largest provider of support services for carers in the UK.

Website: www.carers.org

Citizens Advice Bureau

The Citizens Advice Bureau helps people deal with their legal, money and other problems by providing free, independent, and confidential advice.

Website: www.citizensadvice.org.uk

The Colostomy Association

Providing support and information to anyone who has a colostomy.

Helpline: 0800 328 4257

Website: www.colostomyassociation.org.uk

Cruse Bereavement Care

Cruse Bereavement Care provides counselling, support, information, advice, education and training services to the friends and relatives of someone who has died.

Helpline: 0808 808 1677

Website: www.cruse.org.uk

Diabetes UK

The largest charity in the UK for the care and treatment of people with diabetes.

Helpline: 0345 123 2399

Website: www.diabetes.org.uk

Headway

A charity that promotes understanding of all aspects of brain injury and provides information, support, and services to people with a brain injury, their families and carers.
Helpline: 0808 800 2244
Website: www.headway.org.uk

HealthTalkOnline

Former patients and their relatives relate their intensive care experiences on film.
Website: https://healthtalk.org/introduction/intensive-care-experiences-family-friends/

HEART UK

Heart UK provides support and guidance for people with concerns about cholesterol.
Helpline: 01628 777046
Website: www.heartuk.org.uk
Community: www.heartuk.org.uk/healthunlocked

ICU Delirium

The goal of ICU Delirium is to enhance awareness of and improved monitoring for brain dysfunction as an acute and chronic ailment that people suffer from when they develop critical illness.
Website: www.icudelirium.org

ICU Steps

The ICU Steps is a national charity founded in 2005 by ex-patients, their relatives and ICU staff support patients and their families on the road to recovery from critical illness.
Website: www.icusteps.org

Macmillan Cancer Support

Macmillan Cancer Support improves the lives of people affected by cancer. It provides practical, medical, emotional, and financial support and campaigns for better cancer treatment.

Helpline: 0808 808 0000

Website: www.macmillan.org.uk

Meningitis Now

A charity which provides emotional and financial support for people affected by meningitis.

Helpline: 0808 801 0388

Website: www.meningitisnow.org

PatientUK

This website allows people to download, or listen to, evidence- based information leaflets covering a wide range of medical and health topics.

Website: www.patient.co.uk

Samaritans

Samaritans provides confidential, unbiased emotional support, 24 hours a day, for people who feel distressed, desperate or suicidal.

Helpline: 116 123

Website: www.samaritans.org

Spinal Injuries Association

A support charity for people suffering from spinal cord injuries.

Helpline: 0800 980 0501

Website: www.spinal.co.uk

Stroke Association

An organisation that provides support for stroke survivors, their families, and carers.

Helpline: 0303 303 3100

Website: www.stroke.org.uk

The UK Sepsis Trust

The UK Sepsis trust works to promote awareness of sepsis, improve its treatment and provide support to patients and their relatives.

Phone: 0800 389 6255

Website: www.sepsistrust.org

Winston's Wish

A charity for children whose parent, brother or sister has died. Winston's Wish helps them to rebuild their lives and face the future with hope.

Helpline: 08088 020 021

Website: www.winstonswish.org.uk

We have interpretation services. If you need a translator, please point to your language and we will get one for you.

NHS
University Hospitals Sussex
NHS Foundation Trust

Bangla
আমাদের কাছে দোভাষী পরিষেবা পাওয়া যায়। আপনার যদি দোভাষীর প্রয়োজন হয় তবে দয়া করে আপনার ভাষাটি দেখিয়ে দেবেন এবং আপনার জন্য আমরা একজনকে ডেকে পাঠাব।

Persian (Iran)
ما خدمات ترجمه شفاهی را ارائه می کنیم. اگر به مترجم نیاز دارید، لطفا بر روی زبان اصلی خود اشاره کنید و ما با یکی از مترجم ها تماس خواهیم گرفت.

Polish
Oferujemy usługi tłumaczeniowe. Jeśli potrzebuje Pan(i) tłumacza ustnego, prosimy wskazać swój język, a my zadzwonimy po niego dla Pana/Pani.

Portuguese
Dispomos de serviços de interpretação. Se necessitar de um intérprete, indique a sua língua e chamaremos um para si.

Russian
У нас есть услуги устного перевода. Если вам нужен переводчик, укажите свой язык, и мы вызовем его для вас.

Romanian
Avem servicii de interpretariat disponibile. Dacă aveți nevoie de un interpret, vă rugăm să indicați limba dumneavoastră și vă vom apela la unul.

Spanish
Disponemos de servicios de interpretación. Si usted necesita un intérprete, por favor, indique su idioma, y nosotros llamaremos a uno para usted.

Turkish
Tercümanlık hizmetimiz mevcuttur. Bir tercümana ihtiyacınız varsa, lütfen ana dilinizi gösterin. Sizin için bir tercüman arayacağız.

Arabic (modern standard, Middle East)
لدينا خدمات الترجمة الشفهية الفورية المتاحة. إذا كنت بحاجة للحصول على المترجم الشفهي، فيرجى الإشارة إلى لغتك وسنتصل بالمترجم لمساعدتك.

Arabic (Egyptian)
تتوافر لدينا خدمات الترجمة الفورية. إذا كنت بحاجة إلى مترجم فوري ، فيرجى الإشارة إلى لغتك وسنوفر لك مترجما بلغتك التي اخترتها.

For staff: please go to the Communications Support and Translation Services page on the staff intranet at **nww.uhsussex.nhs.uk/communications-support-and-translation-services/** or scan the QR code.

This information is intended for patients receiving care in Brighton & Hove.

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