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REHABILITATION AFTER CRITICAL ILLNESS

Rehabilitation after critical illness: how to facilitate a successful return to work

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I welcome the recent articles on the need for rehabilitation after critical illness and the lack of appropriate resources to provide what is needed.^{1 2} The deficiencies in rehabilitation services have long been recognised.³ In my experience, it is quite possible for a consultant in rehabilitation medicine to have beds to receive patients from intensive care, discharge them into the community, and continue to support them from a team that may be community based or an extension of the hospital rehabilitation service. Regrettably, such rehabilitation teams are in short supply.⁴

White and colleagues comment on the ability to return to work (RTW) after critical illness.¹ Delayed RTW or job loss can be catastrophic for patients and their families, but also costly for employers and the state.⁵ Intensive care teams can help by ascertaining (through talking to the patient or their family) whether or not their patient was working before their illness.⁶ Advise those who were working that it is important to remain in contact with their employer.⁷⁻⁹ Other ways of supporting people back to work after severe illness can include a phased RTW which might start with a few hours per week, working from home, modifications to tasks or responsibilities at work, allowing time off work for health related activities such as appointments and rehabilitation, and use of the Access to Work scheme or other advice from the Department for Work and Pensions.¹⁰

The technical aspects of how this is achieved by vocational rehabilitation professionals has been described elsewhere.¹¹ Critical care teams can, by these simple means, reduce unnecessary worry about future job prospects. Facilitating a successful RTW helps not only patients and their families but also their employers and the government.

These views are personal and do not necessarily reflect those of the Vocational Rehabilitation Association.

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