

Delirium

Around a third of patients aged over 65 admitted to hospital may suffer an acute confusional state called 'delirium'. There are many causes of delirium, such as infection, constipation, pain and medications. Delirium can take time to resolve once the underlying trigger has been treated. It frequently settles faster when the patient is in a familiar environment, such as their own home. It can take weeks or even months to fully resolve, but sometimes may represent a new chronic level of confusion, and sometimes may unmask a new diagnosis of dementia. Delirium can be distressing to witness and experience, but the ward team are trained to recognise and treat it if it develops.

ReSPECT

Sometimes patients become more unwell, and the intensity of treatment may need to be escalated. However, some treatments, such as being treated on the intensive care unit (ICU), can be physically and psychologically challenging, and may not be the right course of action. During an admission, patients and families will be given the opportunity to discuss the patient's individualised Recommended Summary Plan for Emergency Care and Treatment (ReSPECT). More information on what this is can be found here: <https://www.resus.org.uk/respect>

Please note we have zero tolerance to abuse towards our staff.

If you have concerns, please contact the ward manager or the Patient Advice and Liaison Service (PALS) on 0118 322 8338 or email PALS@royalberkshire.nhs.uk

Contact details

The direct ward phone number:

0118 322 6901 or 0118 322 8272

Clinical Admin Team (CAT 10)

Tel: **0118 322 5474**

Email: rbb-tr.CAT10@nhs.net

Ward Manager: Carly Richardson

Consultants: Dr Chatterjee / Dr Dean / Dr Joyce / Dr Dhillon

Friends and Family Test

Please give feedback by completing the Friends & Family Test – fill in a card issued before you leave hospital.

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

RBFT Elderly Care, September 2025
Next review due: September 2027



Welcome to Emmer Green Ward: Hip Fracture Unit

Information for
patients, relatives
and visitors

Emmer Green Ward is a hip fracture unit. We manage your care before and after surgery and we provide rehabilitation to help you reach maximum independence following your injury. Our aim is to discharge every patient within two weeks.

From the day of admission, we will be planning for your safe discharge out of hospital. You will be allocated a physiotherapist and an occupational therapist, who will work closely with the doctors and nurses to rehabilitate you after surgery. Sometimes, going home is not possible and you may be transferred to another setting for further rehabilitation, such as a community hospital. You may be discharged home with a care package and further community rehabilitation. Patients who go directly home needing wound care or injections after discharge will receive this care from either the GP practice nurses or the district nurse (if the patient is unable to travel to the GPs surgery). The ward staff will arrange this. If an outpatient appointment is needed, it will be given on discharge or sent in the post.

If you are being discharged directly to your home, we do ask that you arrange your own transport. Advice will be given regarding getting in and out of a car. We aim to use the Discharge Lounge in Battle Block for all our patients awaiting discharge.

Essential items to bring in

- Toiletry items such as soap, flannel, hairbrush, toothbrush and toothpaste.
- Slippers and practical shoes.
- Night and day wear.
- Books, magazines, pens, paper.
- Snacks, bottle of squash.

Valuables

Patients are responsible for their own belongings. Please do not bring any valuables into hospital – relatives / friends will be asked to take them home for safekeeping. Please keep cash in the locker under £10 for newspapers etc.

Visiting

As a hospital, we encourage open visiting; however, **on Emmer Green Ward, please schedule your visit between 12.30pm and 7pm.** This allows our team to deliver essential care – including ward rounds, personal care and rehabilitation. Designated carers and visitors to patients at the end of life are allowed anytime. Please discuss your needs with the nurse in charge.

Two visitors per patient at any one time.

Please contact the ward before visiting, as visiting times and restrictions may change. Do not visit if you have / had diarrhoea and/or vomiting in the last 48-hours; or any of your household have any Covid-19 symptoms.

Please ensure you use the hand gel when entering and leaving the ward.

Medical information

Any queries about your treatment, aftercare or any other matters, please ask the doctor, nurse or therapist; who will be happy to help.

Telephone enquiries

If you are unable to visit the ward, we are only able to give limited information over the phone. Please ring after 11am for general enquiries and please nominate one relative as main contact to maintain good communication.

Car parking

Public parking is pay on exit (pay at pay point machine or via the APCOA app before leaving) and the nearest parking is located on Levels 0-3 of the multi-storey car park. Disabled parking bays are clearly marked.

Mobile phones

You can use mobile phones in public / communal areas but not on the wards, without permission. Be sensitive to the needs of others when using your phone.

Entertainment systems are at the bedsides with charge cards available from a machine near the ward entrance.