



## Dorset County Hospital Major Trauma Service



**Welcome to the major trauma service at Dorset County Hospital NHS Foundation Trust. This leaflet aims to introduce the trauma service and the people you will meet during your stay, and to help you understand what will happen during your time here and outline the next steps.**



## Why am I under the major trauma service?

You have been identified as a patient suffering with a significant traumatic injury based on the severity of your injuries. Therefore, you will benefit from being under the care of the major trauma service to co-ordinate your care whilst in hospital through to your discharge.

## What happens next?

Some of the patients with major trauma who come to Dorset County Hospital need to be transferred to another hospital for ongoing care that cannot be provided here – this transfer would usually be to the hospital in Southampton. Now that you are on an in-patient ward, it is likely that you will be staying here until your discharge, but if, for example, you need an operation or care that cannot be carried out at Dorset County Hospital, your hospital team will organise any transfers.

If you are from outside the Dorchester area, perhaps on holiday here, you could discuss with the team looking after you the options of transfer to your local hospital for ongoing care. However, this will not always be possible and it may be best for your health to have your injuries treated at Dorset County Hospital until you are ready for discharge.

## Members of the major trauma team you may meet:

**Doctors:** All our patients are looked after by one of the teams of doctors with a named consultant allocated to your care. Sometimes during your stay, you will be transferred between teams as the needs for your conditions change. Depending on the nature and severity of your injuries, you could be under one of a few teams that would include orthopaedics, general surgery, urology, and general medicine. If you are particularly unwell, you may spend some time on the high dependency or intensive care units before you are stepped down to a general ward when your condition improves.

**Ward Nurses:** These are the nurses who work on the ward where you are staying.

**Nurse Practitioners:** These are nurses with an area of specialist expertise who work closely with the doctoring teams.

**Pain Team:** If you have complex pain control requirements, you may be seen by the acute pain team nurses.

**Trauma Co-ordinators:** These are nurses who will co-ordinate your care with regards to any operation you may need whilst at Dorset County Hospital.

**Trauma Rehabilitation Co-ordinator:** A Physiotherapist who will co-ordinate your rehabilitation needs whilst in the hospital. Rehabilitation helps you to be as independent as possible in everyday activities and helps to enable participation in education, work, recreation, and meaningful life roles such as taking care of family.

**Rehabilitation Consultant:** This is a doctor who specialises in rehabilitation.

**Therapists:** These can be **physiotherapists** (support with physical mobility), **occupational health** (support with your ability to perform everyday tasks if you are having difficulties), **dieticians** (support with any dietary or feeding needs if this is an issue), **speech and language therapists** (who support with swallowing and communication) amongst others.



## Allocated Key Worker

You will be allocated a named key worker who will be your point of contact after discharge if you have any need for support directly related to your injury. This named key worker will likely be the trauma rehabilitation co-ordinator or one of the therapists. They can be contacted in normal working hours and will aim to be in touch with you as soon as possible should you seek their help.

Your allocated key worker is: .....

Their job role is: .....

Their contact details are: .....

## Psychological effects of a traumatic injury

The psychological impact of a traumatic injury should not be overlooked and will be more likely in certain scenarios like a high-speed car crash or following an assault. It is of course normal to be shaken by the events that led to your injury, but please let any of the team caring for you know if you are concerned by the way you are feeling, particularly if you are having flashbacks, feeling very low or even suicidal. It may be that these feelings do not appear until after discharge.

In such situations you should contact your GP to discuss, or you can self-refer to the “Steps to Wellbeing” service. If not addressed early, these feelings can develop into long-term mental health issues such as depression, anxiety, specific phobias, PTSD (post-traumatic stress disorder) and addictions (eg alcoholism).

## PTSD

Most people that experience trauma will **not** go on to develop post-traumatic stress disorder. PTSD can only be diagnosed a minimum of three months post-trauma; this may be even longer if you are in hospital for a long time, as being an inpatient may be actively traumatic.

## PTSD Symptoms

The specific symptoms of PTSD can vary widely between individuals, but generally fall into the categories described below:

**Re-experiencing.** This is when a person involuntary and vividly relives the traumatic event in the form of flashbacks, nightmares, repetitive and distressing images or sensations. Some people experience constant negative thoughts focused on their experience, repeatedly asking themselves questions that prevent them coming to terms with the event.

**Hyperarousal** (feeling ‘on edge’). Someone with PTSD may be very anxious and find it difficult to relax. They may be constantly aware of threats and easily startled.

**Avoidance and emotional numbing.** Trying to avoid being reminded of the traumatic event is another key symptom of PTSD. This usually means avoiding certain people or places that remind you of the trauma or avoiding talking to anyone about your experience. Many people with PTSD try to push memories of the event out of their mind, often distracting themselves with work or hobbies. Some people attempt to deal with their feelings by trying not to feel anything at all. This is known as emotional numbing.



## Feedback for us

Feedback (positive and negative) on any aspect of your care during your stay in Dorset County Hospital is very helpful, as this will either help promote good practice, or help us improve things where we may have fallen short of the level of care we would want to deliver to our patients.

If you would like to offer any feedback, please address to this to:

**Rachael Hufton, Trauma Rehabilitation Coordinator/Highly specialised Physiotherapist (Phone: 07789050346, Bleep: 769), at Dorset County Hospital, Williams Avenue, Dorchester, Dorset DT1 2DY.**

This feedback can be anonymous, but it will be useful for us to have your name and date of birth to help us pass on any comments to the teams that looked after you. It will also help us to make improvements if we can identify which ward you were on. You can do this after discharge or whilst you are in hospital by asking for a pen, paper and envelope from the nursing team. We will not routinely look to reply to any of this feedback, so if you have a complaint or any other issue that you would like a response to, please do this through the **PALS Service (Patient Advice and Liaison Service)** on **0800 783 8058** or email [pals@dchft.nhs.uk](mailto:pals@dchft.nhs.uk)

## Useful Contacts and Websites:

**Dorset County Hospital switchboard:** Tel: 01305 251150 (If you would like to contact a ward, please ring the switchboard stating the ward required).

**Samaritans:** Tel: 0330 094 5717

**After Trauma** (supports survivors of traumatic injury and their families): [www.aftertrauma.org](http://www.aftertrauma.org)

**Headway** (UK-wide charity that works to improve life after brain injury): [www.headway.org.uk](http://www.headway.org.uk)  
Tel: 0808 800 2244

**Spinal Injuries Association:** [www.spinal.co.uk](http://www.spinal.co.uk)

**Steps to Wellbeing:** [www.steps2wellbeing.co.uk/self\\_referral/](http://www.steps2wellbeing.co.uk/self_referral/)  
Email: [dhc.west.admin.s2w@nhs.net](mailto:dhc.west.admin.s2w@nhs.net) Tel: 0300 790 6828

**Victim Support:** [www.victimsupport.org.uk](http://www.victimsupport.org.uk), Tel: 0808 168 9111

**Mind:** (national association for Mental Health, Mind is a resource for people providing information and signposting, helplines, online forums, and low-cost counselling): [www.mind.org.uk](http://www.mind.org.uk)

### About this leaflet:

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If you have feedback regarding the accuracy of the information contained in this leaflet, or if you would like a list of references used to develop this leaflet, please email [pals@dchft.nhs.uk](mailto:pals@dchft.nhs.uk)



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