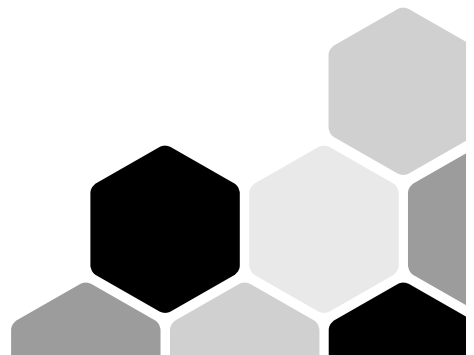




East Suffolk and
North Essex
NHS Foundation Trust

Recovery following COVID-19





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Introduction

The aim of this booklet is to provide you with information to assist and support your recovery following your discharge from hospital. It is important to understand that recovery from COVID-19 will take time and that each person is different in their rate of recovery.

Individuals are likely to have different problems due to the impact of COVID-19. Listed below are some of the common problems you may experience during or after the illness:

- muscle weakness
- breathlessness
- sputum (coughing up secretions)
- fatigue/feeling extremely tired
- reduced physical fitness
- poor appetite
- weight loss
- a quiet or hoarse voice
- difficulty with swallowing
- confusion
- feeling frightened or anxious
- difficulty with thinking and memory.

Some people recover quickly after COVID-19 and do not require much support. However, some will require more time to help with their recovery. It is important to be patient and stay positive. Setting realistic goals can help you to feel a sense of achievement and see your progress.



Managing breathlessness

Relaxed breathing / breathing control

When people become breathless they tend to breathe from the top of the chest, however it is more efficient to use the diaphragm and expand the lower chest. This method can be learnt through practicing relaxed or controlled breathing.

To complete relaxed breathing:

- Sit in a comfortable position with your head, shoulders and back well supported.
- Relax your shoulders and neck.
- Concentrate on breathing gently through your nose, keeping your breath as relaxed as possible. If you are feeling short of breath and find yourself breathing through your mouth, you may wish to start by breathing in through your nose and out through your mouth. As you feel more comfortable try to breathe out through your nose too.
- Place one hand on your stomach and one on your upper chest. You should feel your abdomen gently expanding as you breathe in and your upper chest should be as still as possible.
- You may find it helpful to count as you breathe to help you relax more. You can try counting 'one' as you breathe in and then 'two, three' as you breathe out. Try to pause between breaths. To feel the benefits of this, it is important to begin by practising this method when you are comfortable and not short of breath. This will help you feel more confident with the technique and you will find it easier to complete when you do feel short of breath.



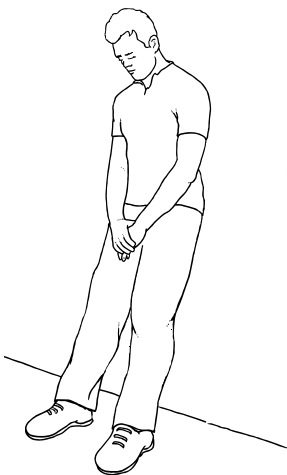
It is best to practise little and often throughout the day for a few minutes at a time. It can help to try to get into a routine or have reminders around the house.

Positions of ease

To help relieve your breathlessness, you can position yourself to help control your breathing and use your respiratory muscles more effectively.

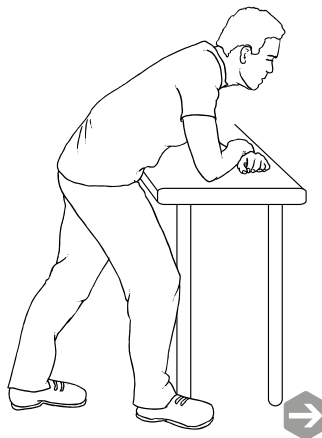
1 Forward lean sitting

It can help to lean forward, resting your elbows on your legs to enable your shoulders and upper chest to relax.



2 Leaning back against a wall or stable surface

This is useful if you are walking and need to rest between destinations. It allows you to relax and concentrate on your breathing more.



3 Stand leaning forward

This can be on any stable surface such as a table, back of chair or wash basin.



Tips to help with breathlessness

- Keep your breathing as relaxed as possible. Forcing your breathing will increase the amount of work your muscles are doing.
- Try not to talk and move at the same time.
- Give yourself time to recover your breath.
- Relax or distract. It may help to focus on a picture or a view from a window.
- Hand-held fan – many people find that if they feel short of breath, using a hand-held fan is very effective at recovering their breathing. You can try holding the fan in front of your nose and mouth when you feel short of breath.
- ‘Blow as you go’ – some people find that when they are doing a task that requires effort, they may inadvertently hold their breath. Try not to do this and focus on your breathing during the task.



Managing a dry, irritable cough

If you are coughing up secretions from your chest please see the advice on chest clearance on page 10.

Strategies to help prevent a dry cough

- Stop smoking – giving up smoking is very important as smoking irritates the airways and can cause lung damage. Your doctor, GP or physiotherapist can give you advice regarding this.
- Breathe through your nose as much as you can. Try to build this up slowly so you are eventually using your nose all the time (except when talking or with exercise or exertion).
- Maintain good hydration levels by drinking plenty of water.
- Avoid dehydration by reducing your intake of caffeine and alcohol.
- While eating, keep mouthfuls of food small and chew frequently before swallowing.

Strategies to help reduce the tickle

- Take frequent sips of water to ensure that your throat is moist and less irritable. Have a bottle of water with you at all times to keep your upper airways moist and clear.
- Sucking a sweet. This helps ensure that your throat is kept moist. This is particularly helpful prior to talking for long periods.
- Suck ice cubes, frozen white grapes or fresh pineapple – this helps to moisten the throat and also numb the area which can reduce the urge to cough.



- Cough suppression – during a cough we take in a large volume of cold, dry air through our mouth; our vocal cords are brought together forcefully and we then drive the air out at very high speeds. This process causes irritation in our airways. When irritation occurs, we cough. This creates a cycle of coughing and irritation which worsens each other. To manage this the cycle needs to be broken by learning to regain control over the cough and actively suppressing it. This will take time, practice and perseverance. By reducing the number of coughs, you will reduce irritation and therefore reduce the need to cough.

The ‘stop cough’ technique below can effectively be used for cough suppression:

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‘Stop cough’ technique

- When you feel the need to cough, put your hand over your mouth in order to keep it closed. This will prevent you from taking a deep breath in.
- Swallow once – imagine you are swallowing a mouthful of food.
- Keeping your hand over your mouth, take small, gentle breaths in and out through your nose.
- Tell yourself that you are not going to cough.
- Continue this until the sensation to cough goes away.
- Take your hand away and take a normal sized breath in through your nose.
- If the need to cough returns, repeat the above steps.

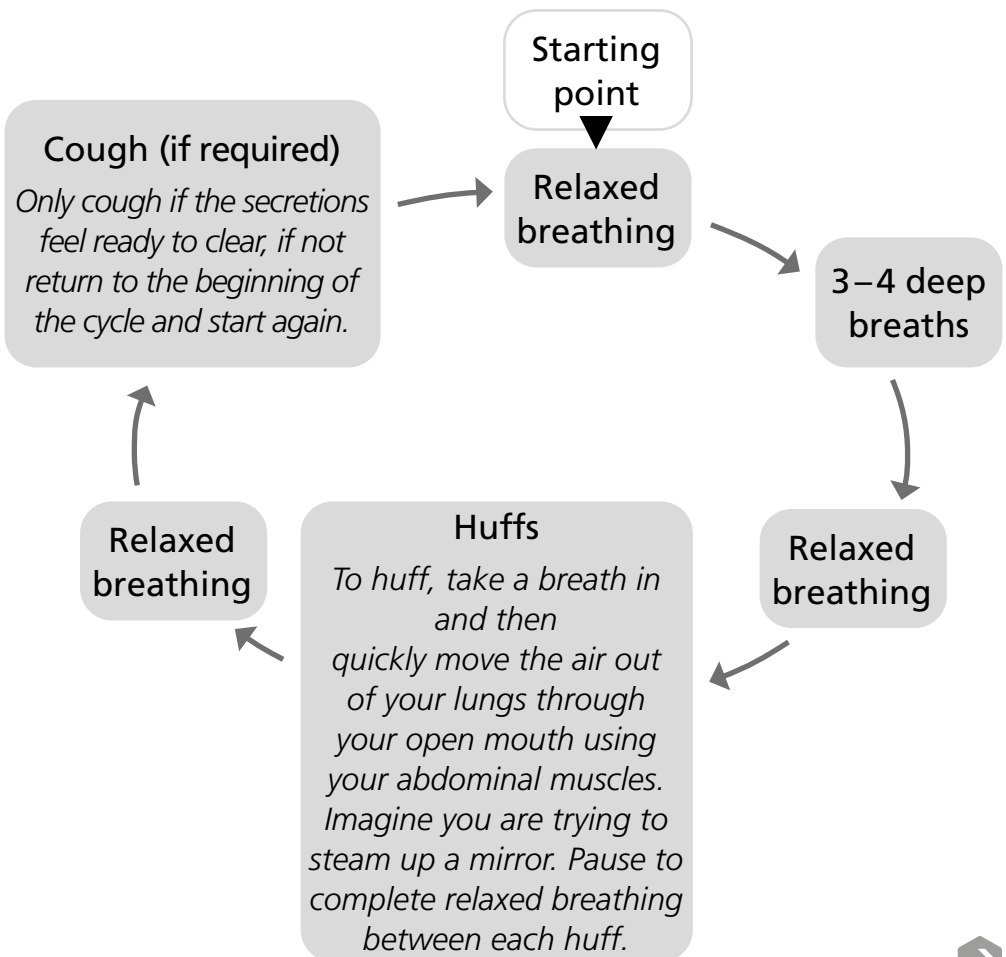
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Chest clearance

With certain lung conditions, or following COVID-19, you may find that you cough and produce more sputum from your lungs. It is important that you try to clear your chest – activities such as getting into a chair, exercising or walking will assist you to clear your chest as they result in deeper breathing. Specific breathing exercises can assist sputum clearance.

Active cycle of breathing technique (ACBT)



If possible ACBT should be repeated until your chest feels clear or nothing more is coming up. If you are feeling fatigued or feel that there is sputum there that is not clearing, stop and try again later.

When to complete your breathing exercises

- If you have a time of day when you clear most of the sputum then it is best to complete the exercises at this time.
- If you are unwell, or if you have more secretions to clear, it is likely that you will need to increase the frequency of treatment sessions during the day.
- If you use nebulisers, it is worth trying the breathing exercise after you have taken these as they will help to open your airways and can help make clearing the secretions easier.
- You may want to avoid completing the breathing exercises straight after a meal.

Contact details

Ipswich Hospital Outpatient Chest Physiotherapy

Tel: 01473 702073 (*please leave a message on the answerphone*)

Stop smoking support – One Life Suffolk

Tel: 01473 718193

Email: info@onelifesuffolk.co.uk

Colchester Hospital

Tel: 01206 742530 (*please leave a message on the answerphone*)

Smoking cessation – North East Essex

Tel: 0300 303 9988

Email: provide.essexlifestyles@nhs.net



Fatigue management

What is fatigue?

Fatigue is a feeling of overwhelming exhaustion or tiredness (both physical and mental exhaustion). It is different from 'being tired' and not always relieved by rest. The unpredictable nature of fatigue means that everyone's experience is different.

Some commonly reported symptoms include:

- difficulty concentrating
- reduced mental capacity/ability
- anxiety
- irritability
- speech impairment
- reduced exercise tolerance
- reduced energy
- light-headedness
- lassitude (extreme exhaustion).

Why do I feel fatigued?

It is common to feel extremely fatigued following acute illness and it may take several weeks or months to gradually subside. If you do not experience a gradual improvement over this time period we would recommend you contact your GP.



What can I do?

There are a few simple pacing techniques that you can try – generally we call them **'the 3 Ps'**.

1 Plan

Plan your activity in advance. Set realistic and achievable goals to give you a sense of purpose and mark your progress. Be prepared to be flexible; you may need to adapt your goals and that's okay.

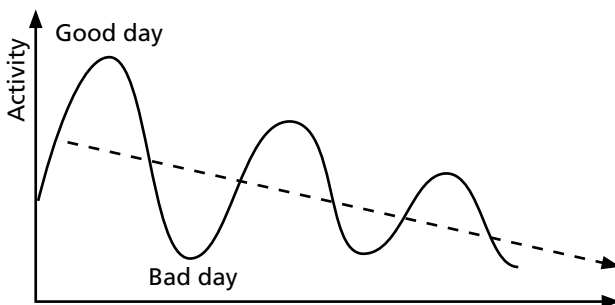
2 Prioritise

Prioritise your tasks for the day; do all the tasks have to be done that day? Can they be done by someone else?

3 Pace

Spread tasks out so you can complete them more effectively.

For a lot of people they have good and bad days. On a good day you may try to do more, which can lead to 'overdoing' it. As a result of this you may experience a number of 'bad' days and be unable to complete tasks you would wish to do. We call this 'Boom or Bust'. But with pacing (even on the good days) we can avoid this pattern.



For example:

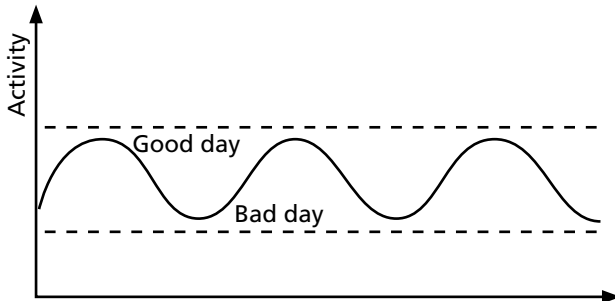
Someone who spends a few hours doing housework or gardening may then have pain and fatigue not only for the rest of that day but for the next few days.

On the other hand, someone who does just 20 minutes then takes a short break and follows this pattern will have less increase in fatigue and can then manage more tasks in the day.

What is meant by a rest/break period?

The amount of rest time will depend on what you need. There is no right or wrong answer but it is about finding out what works for you. Examples of rest could include: relaxation, lying on the bed, mindfulness, sitting in a quiet room or space, and breathing techniques.

Finding a baseline of activity

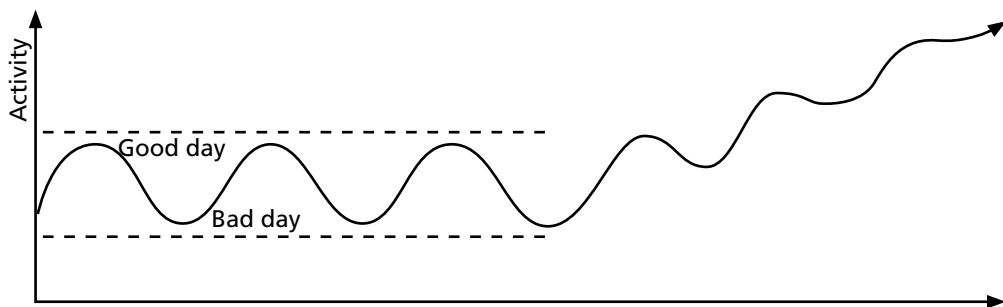


Graded increase in activity levels

The two most important things to remember are:

- you must be successful at one level of activity almost all of the time before you increase it, and
- you need to make small increases each time. This avoids swings of over-exertion and increased fatigue that can happen if you are not careful.





Energy cost

It is important to have an awareness of the different ways that we use our energy. There are four main categories:

- physical – physically moving about is the obvious way to use energy
- cognitive – thinking/concentrating uses energy, for example, doing puzzles or reading
- emotional – strong feelings such as anger, sadness, happiness and laughter all have an energy cost
- environmental – a very busy or stimulating environment can have an energy cost, such as lots of noise or hustle and bustle.

Each individual will experience energy cost in different ways so it is important to work out what costs you the most energy in order to be able to pace activity and manage a graded increase in activity once you have established a stable baseline.

Energy conservation

Below are some energy conservation techniques that patients have reported useful.

Washing and dressing

- If you like a hot shower or bath, take them at the end of the day as heat can make you feel sleepy and fatigued. Some people find sitting down to shower and having all their wash things in one place helpful.
- Use a towelling dressing gown as this can reduce the amount of effort used in drying.
- Have the clothes you want ready and in one place. You can sit down to put on socks, underwear, trousers, skirts etc, standing just once to pull them all up.

Cooking

- Plan what you intend to cook. Some of the preparation can be done in advance, some find sitting down for preparation helps. Allow your food to cool a little before eating, then rest again before the clean-up.

Fatigue diary

Consider keeping a diary of what you have been able to do and your achievements – this can be a great reminder of your progress, especially on not so good days.

A diary can help you learn about your fatigue patterns and triggers. You can use this information to help you plan your activities and use the 3Ps (see page 13) to help modify your activity routines to use your energy most efficiently.



Manage your home

Organise your home so the items you use most are within easy reach. Make adaptations that reduce effort and risk. This could be rearranging furniture, changing the height of your chair or bed, or installing bathing aids. An occupational therapist can identify any aids and adaptations that may support your rehabilitation/moving and handling and provide any equipment where able.

Making sure you have good sleep hygiene

Avoid napping in the day if possible, but if you need to, make sure it is for no longer than 30–45 mins and not after 3 pm, to prevent it from affecting your night time sleep.

- Try to have quality rest breaks during the day rather than naps.
- Avoid stimulants like caffeine, nicotine and alcohol at bedtime.
- Establish a routine. Wind down before bed and only use the bedroom for sleeping – don't watch TV, or use a tablet, phone or laptop etc.

Take time to relax

Relaxation can help with managing symptoms like fatigue, breathlessness and pain. The NHS Apps Library at www.nhs.uk/apps-library/ has a number of relaxation tools, including breathing and mindfulness.

You may feel pressured to return to 'normal activities' – it is important you only do this when you feel ready.

Exercise

During your illness your body will have used energy stored in your muscles to fight the virus and this, combined with prolonged periods of bed rest, will mean that your muscles have reduced in size and strength. A gradual programme of strengthening is vital to aid your recovery.

Activity and exercise are both very important in your recovery. In the early stages, just getting up and dressed can be tiring, but being out of bed and sitting in a chair is much better for you than lying in bed.

There are many benefits of exercise:

- rebuilding muscle strength lost during your illness
- strengthening your heart and lungs
- improving your confidence
- reducing stress levels
- improving your sleep pattern
- improving joint movements.
- getting you back to all your usual activities.

Improving strength takes time and more isn't always best – listen to what your body is telling you.

- It is normal to feel breathless when exercising, but you should still be able to speak in full sentences.
- Completing your exercises shouldn't leave you so tired that you can't do anything else during the day. Doing too much one day may leave you more tired for 2–3 days and slow down your recovery.



- It is normal to feel some muscle and joint discomfort during and after exercise but this shouldn't be intense or last too long. If the discomfort persists, rest for a day, then resume with fewer repetitions. If symptoms still persist, contact your healthcare professional or GP.
- Where possible, try to exercise most days but don't worry if you can't manage the odd day. There will be days when you feel better than others.
- Try to avoid sitting for more than 45 minutes before standing up and moving about the house for a couple of minutes.
- You may have been given some exercises by a member of the therapy team:
 - bed exercises are a good starting point
 - chair exercises can be started as soon as you can sit comfortably in a chair for a couple of hours
 - standing exercises can be completed when you are able to walk independently.
- If at any stage you are unsure whether you should be doing any exercises, stop and ask for advice from a healthcare professional.
- Alongside your exercises, going for a short walk when you are able to, and gradually becoming more active about the house, are all important ways to improve your strength and stamina and shouldn't be underestimated. Once you start to go out walking, plan your route so you know where you might be able to rest.

Nutrition

Nutrition plays an important role in your recovery. It is completely normal to experience weight loss, a reduced appetite or unpleasant changes to how food tastes after COVID-19.

Taking in enough energy, protein, vitamins and minerals from food will help to get you feeling better as soon as possible, give you the strength to undertake any exercises given by your physiotherapist and maintain or rebuild the muscle mass and strength that has been lost during your illness.

Aim for a well-balanced diet to meet the body's needs for recovery.

You can find further advice on healthy eating and portion sizes at www.bda.uk.com/resource/food-facts-portion-sizes.html and www.bda.uk.com/resource/healthy-eating.html

It is important to consider other underlying health conditions, follow any specific recommendations that have been given to you for this and, if needed, request referral to a dietitian for further individual advice.

If you have had a long hospital stay you are likely to have lost muscle mass. To help rebuild muscle you should include protein rich foods and exercise regularly.



Eatwell Guide

Check the label on packaged foods

Each serving (150g) contains	
Energy	1048kJ / 250kcal
Fat	3.0g
Saturated fat	1.3g
Sugar	34g
Salt	0.9g
LOW	HIGH
4%	38%
7%	15%

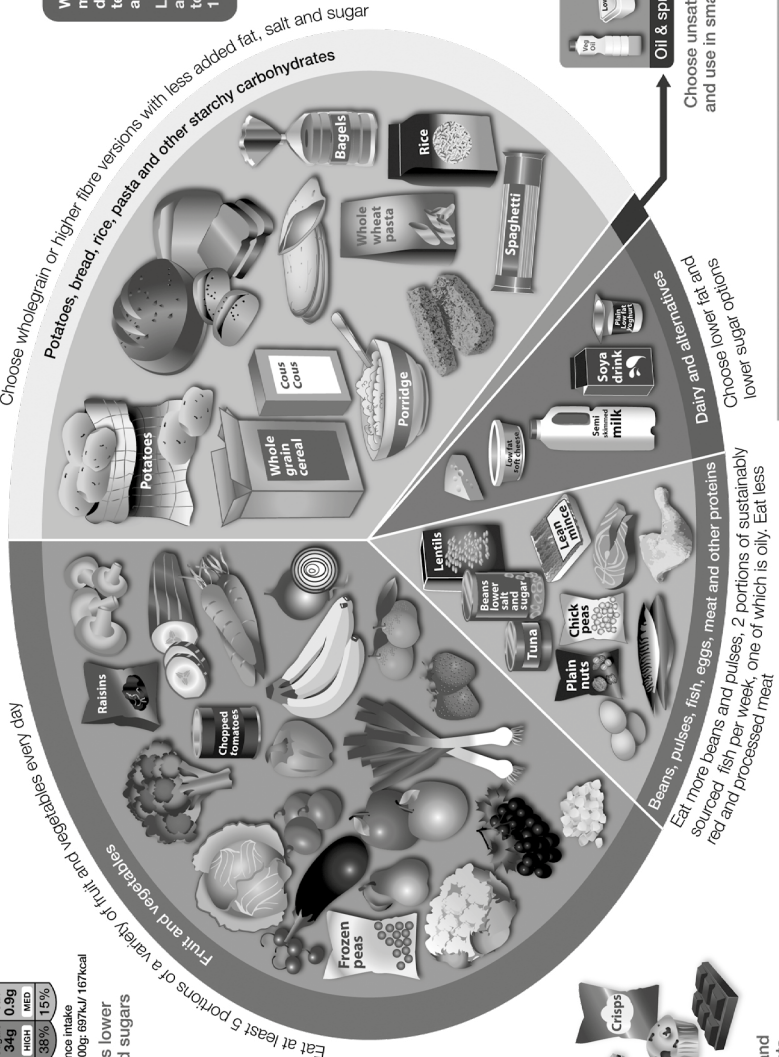
of an adult's reference intake
Typical values (as sold) per 100g: 697kJ / 167kcal

Choose foods lower in fat, salt and sugars



Water, lower fat milk, sugar-free drinks including tea and coffee all count.
Limit fruit juice and/or smoothies to a total of 150ml a day.

Use the Eatwell Guide to help you get a balance of healthier and more sustainable food. It shows how much of what you eat overall should come from each food group.



Eat less often and in small amounts

Per day 2000kcal 2500kcal = ALL FOOD + ALL DRINKS



<p>Snacking ideas – aim for 2–3 snacks per day if your appetite is reduced</p>	<p>Boiled eggs with fruit.</p> <p>Cheese slices with hummus and carrot sticks</p> <p>150g yoghurt with berries (fresh or defrosted) and 1 tsp of chia seeds/mixed seeds.</p> <p>Sandwich with cooked liver paté or ham.</p> <p>Cheese and gherkins.</p> <p>Mini sausages/meatballs with a handful of cherry tomatoes.</p> <p>Nut butter and sliced pear/apple.</p> <p>Toast or crackers with cream cheese and salmon, trout or tinned sardines.</p> <p>Cream cheese with a handful of nuts.</p>
<p>Balance is key – aim to include these food groups at mealtimes</p>	<p>Starch – oats, rice, potato, sweet potato, millet, quinoa, corn, pasta, buckwheat, bulgur wheat, bread, tortilla wraps, couscous.</p> <p>Protein – poultry, beef, fish, lamb, soybeans, lentils, chickpeas, tofu, Quorn, milk, milk alternative, cheese, eggs, yoghurt/soya yoghurt.</p> <p>Fat (in moderation) – avocado, olives, olive oil, rapeseed oil, nuts and seeds.</p> <p>Fruit and vegetables – include a variety of any kind (can be tinned, frozen or fresh) and various colours for example carrots, green leafy vegetables, peppers, sweetcorn, tomatoes, beetroot.</p>



How to increase protein at meals – these tips may be useful if you are eating smaller than usual portion sizes	<p>Add cream cheese or Greek yoghurt to dishes such as wraps, sandwiches, mashed potato and curry.</p> <p>Add grated cheese to vegetables.</p> <p>Add 1–2 tbsps of pea or soy protein powder to smoothies and soups.</p> <p>Add 1 tbsp of nut butter to porridge, crackers or sandwiches.</p> <p>When baking, replace all or half your flour with chickpea flour to increase the protein content.</p> <p>Add unsalted nuts to stir-fry dishes or ground nuts to smoothies, yoghurts and cereals.</p>
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If you are tired, fatigued or breathless

- Choose easy to prepare meals and snacks such as beans, egg or cheese on toast, jacket potatoes, ready meals and tinned meals.
- Choose easy to chew foods that are soft and moist to reduce the effort of eating.
- Take time to relax before and after eating.
- Make the most of times when you feel able to cook by batch cooking and freezing leftovers.
- Try to time eating a main meal when you feel your appetite is greater or at a time of day when you have more energy, for example in the morning.

Managing unpleasant changes in taste

If you are experiencing changes to how food tastes after COVID-19, remember this is a normal side effect and is temporary. Try some of the following:

- switch to plastic cutlery to reduce metallic taste
- suck on frozen pineapple or frozen lemon to stimulate your taste buds
- add extra flavour to foods where possible. Avoid spicy foods if you can't tolerate them at this time, but try herbs and sauces or marinades wherever possible
- mouthcare is important. Brush your teeth and tongue at least twice a day
- drink plenty of fluids – aim for at least 6–8 cups/glasses per day as a rough guide
- try a variety of foods, flavours and textures and keep retrying foods.

Weight loss and poor nutritional intake

Further advice on nutrition and COVID-19, including what to do if your appetite is poor or you are continuing to lose weight can be found at the following links:

- <https://covidpatientsupport.lthtr.nhs.uk/#/> and look at the Eating Well to Help you Recover section
- www.malnutritionpathway.co.uk/covid19



If you are experiencing one or both of the following please speak to your GP about referring you to a dietitian for further advice:

- continued weight loss since discharge from hospital – if you are unable to weigh yourself at home, looser clothes and/or jewellery is usually a good indicator you are losing weight
- consistently eating less than 50% of meals and ongoing poor appetite.

Contact details

Ipswich Hospital and East Suffolk Community Dietitians

Tel: 01473 704000

Colchester Hospital Nutrition and Dietetics Service

Tel: 01206 742166

North Essex Community Dietitians (ACE)

Tel: 0300 003 2144

(you will need a GP referral to access this service)



Swallowing

COVID-19 and the treatments you have received in hospital can affect your swallowing. If the muscles used for swallowing have not been used regularly they can become weak, making swallowing more difficult. Ongoing breathlessness can also impact on your swallowing making it feel 'different' or needing more effort. Therefore, it might take longer to drink or eat a meal and you may become tired more easily. Below are safe eating and drinking strategies which may help:

- make sure you are sitting fully upright when eating and drinking
- allow plenty of time, reduce your speed and take breaks if needed
- reduce distractions when eating and drinking
- take smaller sips of fluids and smaller mouthfuls of food
- if you are feeling short of breath when chewing, consider trying softer foods which require less chewing
- try eating smaller meals throughout the day rather than three normal meals
- try to record how often symptoms happen, and what foods or drinks they relate to
- make sure you maintain good oral hygiene – brush teeth and gums twice daily (unless otherwise advised by your doctor or dentist) to keep your mouth clean and healthy.



If you continue to experience swallowing difficulties or have any of the following:

- coughing when eating or drinking
- a wet/gurgling sounding voice when eating or drinking
- sensation of food sticking in your throat
- a new or frequent chest infection

please contact your GP to request a referral to Speech and Language Therapy.



Communication

Some people may experience changes to their communication which impacts how well they can interact with others. Your voice might sound different; it may sound rough or hoarse, quiet or weak. This could be as a result of your treatment for COVID-19 (for example being ventilated), or as a result of the symptoms you have experienced (such as breathlessness). Communicating with others can become more effortful and tiring. Some people may also experience changes to their understanding of the world around them, and how they are able to express themselves.

The strategies below can be used to support your communication:

- make sure you are sitting in an upright position
- take a breath before talking
- speak in shorter sentences
- try not to shout or force your voice
- reduce noise and distractions within your environment when communicating
- have regular sips of water and reduce your caffeine and alcohol intake
- use other non-verbal methods of communication such as pen and paper if you are particularly tired
- check your understanding, writing information down if required

If you continue to experience difficulties with communication or swallowing, please contact your GP to request a referral to Speech and Language Therapy.



Confusion, thinking and memory

It is common for people to experience confusion during an illness and this may still be present when you are discharged from hospital. This can range from mild confusion or feeling 'muddled' to a severe state of confusion, which is known as delirium. Delirium is usually temporary and resolves as the illness improves; however it can take a while to completely clear and can feel scary for the person experiencing it and their relatives or carers.

A person with delirium may:

- not know where they are
- think they can see frightening objects, people or animals
- think people are trying to harm them
- believe that noises are threatening and signs of danger
- feel agitated and struggle to concentrate
- have movements that are not usual for them
- have reduced mobility and appetite, or withdrawal (hypoactive delirium).

Delirium can change quickly so there may be periods when the person is able to join in a conversation with people around them one moment but then lapse into a confused state again the next.

You may also experience cognitive difficulties or changes in your thinking skills. This could include difficulties with memory, concentration, planning and organising, problem solving and insight and awareness into your own situation.

It is possible that these difficulties may be due to other reasons or disease processes which may have been exacerbated by your recent illness, for example sleep deprivation, dehydration, stress and low mood, medication side effects.

What should I do?

Try not to worry as there are lots of things you can do to help with these difficulties and there is also support available in the community.

Some general tips to help:

- keep to a daily routine, keep things in the same place at home
- use memory aids such as diaries, calendars, daily newspaper, reminders on your mobile phone, timers, lists
- focus on the tasks that are most meaningful to you first, gradually building up how much you take on
- talking to others about your feelings and emotions can help make sense of how you are feeling
- write down what you can remember to help you to collect together your memories
- when you are ready and when it feels safe to do so, you may choose to arrange to re-visit the hospital ward. This may be very difficult for some people to do, but it can be one way that helps to make sense of what happened and identify what was real and what was imaginary.



How your relatives and friends can help

- Being patient and understanding.
- Helping you keep to a routine.
- Giving you prompts and supervision to enable you to carry out tasks (rather than doing everything for you).
- Some people may not want to remember what happened and may not want to talk about it. Others may find it very painful to remember their time of illness and may need to take their time before they can begin to think about what has happened to them.

Outlook

Depending on the cause of your cognitive problems, the outcome may vary. Some cognitive problems can appear very subtle while performing routine activities at home but when challenged with more complex and demanding tasks such as work roles, more significant difficulties may arise.

We would recommend that you monitor any difficulties that you are having for up to three months following your discharge from hospital. If you do continue to experience difficulties and these are persistent or become overwhelming please talk to a healthcare professional or GP for further information and support you may be able to access.



Emotional aspects

Being physically unwell has an emotional impact. Your physical recovery will involve a period of adjustment which may take some time, especially if you were hospitalised during your illness. It is common to feel some or all of the following:

- anxiety
- low mood
- being extra aware of bodily symptoms
- changes to your sleep pattern and possibly strange dreams or nightmares
- poor memory
- difficulty concentrating.

However, not everyone will experience difficulties and, in some cases, people who have had a serious illness experience positive psychological changes. For example, a sense of gratitude or the desire to help others.

It is important to recognise that the recovery process may take weeks or even months and while this might feel very frustrating at times, it is essential to ensure that you don't 'overdo it', both physically and emotionally. Be kind to yourself and try to build in little 'rewards' for every achievement, no matter how small it seems.

Sharing your feelings and emotions with family and friends can help you deal with what has happened to you, and they can support you by listening – but only when **you** are ready.



Grounding exercises

Sometimes in hospital there is just too much time to think – our mind works overtime, which may be unhelpful. It is important to work with your mind to try to help it be more of a friend to you. Grounding your mind to focus on the here and now is important. Here are some techniques:

- grounding statement – we can sometimes forget that we are safe in the present. It can be helpful to write a 'grounding statement' to remind yourself that you are safe. You can read it if you become upset. For example: 'I survived and I am safe now'.
- mindfulness – mindfulness is about being aware of what is happening in the present, moment-by-moment, without making judgements about what we notice.

Be patient and compassionate with yourself. Try to describe your experiences – 'good or bad', 'pleasant or unpleasant' – rather than make judgements about them. 'It is as it is'; 'It will pass'. There are many mindfulness apps and websites available on the internet.

Mindfulness exercise – Look around the room and really notice, spending about 30 seconds on each task, three things you can see (for instance a lamp, a chair leg, a picture), three things you can hear (maybe bird song, traffic, a clock), three things you can touch or feel (like a sleeve, a gust of wind, the chair you are sitting in). This will help you stop the worry cycle and focus on the here and now.

Anxiety and depression

You may find that you feel low, anxious, or worried either when in hospital or once you get home – this is a normal response to all the changes that have happened in your life. You may experience physical symptoms of anxiety like increased heart rate or butterflies in the stomach. You may have racing thoughts, imagining worst outcomes and your family may notice you not being able to relax and being irritable.

You may feel sad, guilty, numb, angry or hopeless and you may find it difficult to get going with life. You may also find yourself avoiding situations and comforting yourself with alcohol or junk food.

All these symptoms, emotions, thinking patterns and behaviours may indicate that you have anxiety and low mood, but fortunately there are many ways you can access help.

If you need support with any of these issues please contact your GP practice or go to:

www.nhs.uk/oneyou/every-mind-matters/

Samaritans

Tel: 116 123 (24 hr helpline)

Web: www.samaritans.org

In North East Essex:

Health in Mind

Tel: 0300 330 5455

Web: www.northessexiapt.nhs.uk/north-east-essex

In Suffolk:

Suffolk Wellbeing Service

Tel: 0300 123 1503

Web: www.wellbeingnands.co.uk



Contact numbers and resources

Colchester Hospital

General hubs/directories for care and support services (help with care, equipment, health and wellbeing, finances, staying safe and social activities)

- Essex Lifestyle Services (incorporates Essex community agents)
Tel: 0300 303 9988
Web: www.essexlifestyleservice.org.uk
- HealthWatch Essex Information Service
Tel: 0300 500 1895
Web: www.healthwatchessex.org.uk
- Adult Social Care
Tel: 0345 603 7630
Web: www.essex.gov.uk/topic/adult-social-care-and-health

Community health and wellbeing (signposting to health-related services such as community rehabilitation, healthy living and healthy lifestyle)

- ACE Community Gateway
Tel: 0300 003 2144 (North Essex only)
Web: www.acecic.co.uk/our-services/
- Provide Community Social Enterprise (Referrals via GP only)
Tel: 0300 131 0111 (mid Essex only)
Web: www.provide.org.uk/our-services/

Support for independent living and health and wellbeing (including transport, befriending, advice on benefits and assistive technology)

- C360 Transport and Wellbeing services
Tel: 01206 505250 (north Essex), 01376 550507 (mid Essex)
Web: www.community360.org.uk/community-development/essex-connects/



- Age UK Essex
Tel: 01245 346106 (not transport queries)
Web: www.ageuk.org.uk/essex/
- Careline
Tel: 01255 222022 (Tendring), 01206 769779 (north Essex/ Colchester), 0300 303 2682 (mid Essex)
Web: www.essex.gov.uk/technology-for-independent-living/get-help-from-your-local-council

Wheelchair loan

- Red Cross
Tel: 0300 456 1914
Web: www.redcross.org.uk/get-help/borrow-a-wheelchair
Red Cross also loan/provide basic equipment
- North Essex Wheelchair Loan
Tel: 01255 201771
Web: www.esneft.nhs.uk/service/wheelchair-services/
- Mid Essex Wheelchair Loan
Tel: 0300 303 9957
Web: www.provide.org.uk/service/wheelchair-service/
- Ableworld Colchester (wheelchair/basic equipment loan)
Tel: 01206 561335
Web: www.ableworld.co.uk/colchester-branch.aspx

Support for carers

- Carer support (Essex County Council)
Web: www.essex.gov.uk/emotional-support-for-carers
- Carers First
Tel: 03003031555
Web: www.carersfirst.org.uk/essex



Ipswich Hospital

- Care Coordination Centre
Community (district) nurses, physiotherapists, occupational therapists
Tel: 0300 123 2425
- Customer First (Social Care Services)
Tel: 0808 8004005
- Age UK Suffolk (Ipswich Helpdesk)
Tel: 01473 351234
Web: www.ageuk.org.uk/suffolk/
- Suffolk Family Carers
Offer information and guidance to family carers
Tel: 01473 835477
Web: www.suffolkfamilycarers.org
- Red Cross Support at home service
Offers short term practical and emotional support at home, to help people regain their independence
Tel: 01473 702485
Web: www.redcross.org.uk
- Red Cross Ipswich Mobility Aid Service
For short term equipment loan
Tel: 01473 219261

General resources

- Lancashire Teaching Hospitals have set up an online resource for patients recovering from COVID-19
Web: covidpatientsupport.lthtr.nhs.uk/#/
- Asthma UK and the British Lung Foundation have set up a Post-COVID Hub online to support patients, family members, carers and health professionals
Web: www.post-covid.org.uk
- ICU steps – The intensive care patient support charity, they support patients and relatives affected by critical illness
Web: <https://icusteps.org/>
- NHS Apps Library – apps and online tools to help you manage your health and wellbeing
Web: www.nhs.uk/apps-library/



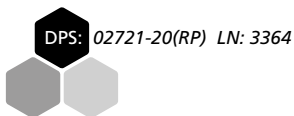
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Please ask if you need this leaflet
in an alternative format.

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