Recovery and Rehabilitation after COVID-19
**Contents**

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction</td>
<td>3</td>
</tr>
<tr>
<td>Setting goals</td>
<td>4</td>
</tr>
<tr>
<td>General recovery</td>
<td>5</td>
</tr>
<tr>
<td>Physical exercise</td>
<td>9</td>
</tr>
<tr>
<td>Breathlessness</td>
<td>19</td>
</tr>
<tr>
<td>Resting and recovery</td>
<td>23</td>
</tr>
<tr>
<td>Eating and drinking</td>
<td>26</td>
</tr>
<tr>
<td>Communication</td>
<td>26</td>
</tr>
<tr>
<td>Psychological wellbeing</td>
<td>29</td>
</tr>
<tr>
<td>Looking after yourself</td>
<td>31</td>
</tr>
<tr>
<td>Support groups</td>
<td>34</td>
</tr>
</tbody>
</table>
Patient Information

Introduction

With your stay in hospital, being unwell and more inactive than normal, you can experience reduced muscle strength, stiff joints, loss of appetite and fatigue. Some people find they have poor quality sleep and abnormal sleeping patterns that can then affect their mood, concentration and memory. This can mean that the slightest activity takes tremendous effort and may tire you out very quickly.

Rehabilitation is about helping your physical and emotional recovery. It is important to remember no two rehabilitation journeys are the same. The amount of progress you make each day will vary, as will your oxygen requirements. You will have peaks and troughs as well as good and bad days. Try not to feel disheartened if you feel there are days where you are taking a step backwards. This is all normal in recovery.

The aim of this booklet is to provide you with some tried and tested ideas to increase your activity and aid your recovery, whilst also discuss some of the issues that may impact your rehabilitation journey.

There is an additional section for your therapist(s) to add more specific information tailored to your needs.
Setting goals

Setting goals can help you to focus on your personal goals during recovery. It is useful to identify both short and long term goals. Short term goals may be things you want to achieve in just a week.

Goals can be about physical recovery as well as psychological wellbeing. Be realistic with your goals so you can see how you are progressing with your recovery.

My personal long term goals are:

To reach my long term goals I need to be able to (these are short term goals):
Fatigue
Working hard is important for recovery but getting enough rest is just as important so that fatigue doesn’t affect your progress. Fatigue can be physical, mental or emotional.

Sleep is the most important aspect of preventing fatigue. Try to get good periods of regular sleep. In order to sleep well, try to avoid napping during the day, have a consistent night time routine and avoid using electronic devices just before bed.

Slow down and pace activities, little and often. Be aware of your limitations and stop to rest and recover as needed.
Make sure you plan and prioritise activities; do not try to fit too much in, complete the most important things first, allow plenty of time to carry out tasks, and consider spreading responsibilities over a few days or asking for help.
Make sure you adapt activities to make them easier, for example; consider sitting down during tasks like personal care and cooking. It may be helpful to get easy to prepare meals or ready meals to reduce the cooking time.

Make sure you have set times for rest and relaxation. If you do more one day, and then feel drained the next day, consider if tasks can be reduced or broken up into different sessions, for example 3 days of 15 minutes of exercise instead of 1 day of 45 minutes.
Don't underestimate how much energy everyday tasks can need.

Psychological Wellbeing
Your mental wellbeing is about how you are feeling right now, and how well you can cope with daily life. It can affect the way we feel about ourselves and others, and about the things we face in our lives.

You won’t have the same support you had in hospital, and it can be a difficult time for you and your relatives. Setting small goals in your daily routine can help you recover and show that you are improving. A small goal could be something as simple as making a drink for yourself, or
Patient Information

walking a few steps further without needing to rest. Don’t push yourself too hard as this can end up making your recovery take longer.

Always consider the wider picture and try to be kind to yourself. If you have had a bad day or haven’t achieved your daily goal, try not to be too hard on yourself. Look back at how far you have come and try to keep your end goals in mind.

Routine

Getting yourself into a normal routine is vital to your physical and emotional wellbeing. If you establish a routine of day-to-day tasks and stick to that routine, you may find that you improve more quickly. For example, try to wake up at a normal time for you, continue by doing things like having a wash and getting dressed.

Functional Tasks

When you leave hospital, examples of functional tasks are things like washing and dressing yourself, walking up and down the stairs or standing to make yourself a hot drink or a sandwich. These are short bursts of activity that help you to get back to feeling yourself.

You may find that you need to rest more throughout the day and this is completely normal. Just remember there is no rush to get things done and a ‘little and often’ approach will help you to save your energy.

Concentration

At first when you leave hospital you may feel unable to concentrate on TV programmes, books or newspapers. This normally gets better by itself as your wellbeing starts to improve. Doing things like quizzes, games, reading the newspaper and completing crossword puzzles can help improve your concentration levels. Again, you may need regular rests so that you don’t feel exhausted.

Smoking

People who smoke are more likely to have breathing and lung (respiratory) problems, may have more complications overall and can take longer to recover. Breathing in second hand smoke can also be a risk factor, and
Patient Information

can cause the same health problems as smoking. It is important to avoid second hand smoke in enclosed spaces.

Stopping smoking improves respiratory health. Breathing, circulation and lung function improve, and sputum and debris can be cleared from airways without the need for constant coughing.

Help to stop smoking is readily available from your GP, pharmacist or by searching NHS stop smoking services online;

NHS – [https://www.nhs.uk/smokefree](https://www.nhs.uk/smokefree)
Healthy Lifestyles – Tel: 0800 122 3780 or visit [www.hlscoventry.org](http://www.hlscoventry.org)

**Nutrition**

While in hospital, many people don’t have much appetite and may lose weight. This might continue for some time once you are at home. Some common symptoms of COVID-19 include: shortness of breath, fatigue, loss of smell and taste or dry mouth. This may make you feel like eating less and mean your body is provided with less nutrition.

High protein foods are important as you recover to help you to rebuild muscle alongside the exercises recommended by your Physiotherapist. High protein foods include meat, fish, eggs, nuts, beans, pulses, soya, dairy, tofu and other meat-free protein foods.

The following links provide helpful information to help with your recovery:

- For those whose weight has remained stable and your appetite is back to normal [https://www.malnutritionpathway.co.uk/library/covid19green.pdf](https://www.malnutritionpathway.co.uk/library/covid19green.pdf)
- If you have a poor appetite and/or have lost some weight [https://www.malnutritionpathway.co.uk/library/covid19yellow.pdf](https://www.malnutritionpathway.co.uk/library/covid19yellow.pdf)
- If you have lost a lot of weight, you may have been seen by a Dietitian and be prescribed nutritional supplements. This advice should be followed supported by a Dietitian [https://www.malnutritionpathway.co.uk/library/covid19red.pdf](https://www.malnutritionpathway.co.uk/library/covid19red.pdf)

If your weight is lower than it was when you were admitted to hospital, it is important to keep an eye on this over the next few months. If you continue
Patient Information

to lose weight or your weight is stable but you would like to regain some weight, your GP can refer you to a Dietitian.

Hydration

Adults need to drink around 1.5-2 litres (3-4 pints) of fluid a day. A typical mug or glass is about 200 millilitres (ml) so this equals 8-10 drinks a day.

Any drink can help to promote hydration. Drinking water is a good way to stay hydrated, however, if you are trying to regain weight or prevent further weight loss nourishing drinks such as milk, milkshake, fruit juice can also help you to stay hydrated and contribute to your energy and/or protein intake.

Be careful with fruit juices as these contain a lot of sugar and are not always suitable for someone with diabetes or trying to control their weight. More information on hydration can be found here: https://www.bda.uk.com/uploads/assets/337cfde9-13c5-4685-a484a38fbc3e187b/Fluidfood-fact-sheet.pdf
Physical Activity

Physical activity does not necessarily mean high level exercise. At first, you should wear a pedometer and monitor your step count and daily activity levels, aiming to gradually increase this.

Day to day activity is important. Try to make small changes to your lifestyle and include more daily activity for example: walking around the block daily, using static seated pedals, walking to the shops or to get the newspaper, longer walks with the dog or children, gardening, manual housework, step-ups on the bottom step of your stairs, spot marching whilst brushing your teeth or at the kitchen worktop, taking the stairs rather than the lift option or cycling to work.

During your rehabilitation, your Physiotherapist will guide you on what types of physical activity will best suit you for your recovery.

Exercises

Exercises may be prescribed by your Physiotherapist in order to target specific muscle groups to improve your overall strength and fitness. If your Physiotherapist has prescribed specific exercises then they will tick the ones that apply to you.

Just remember…

Exercises should be challenging, but not exhausting. If you feel that an exercise is too hard think about:

- Reducing the number of times you do the exercise
- Do it for a shorter length of time

If you find the exercise too easy, why not:

- Increase the number of times you do the exercise
- Increase the length of time you do the exercise for

Important points before you start…

- Follow the instructions in the exercise plan
Patient Information

- Do not do too much too soon. This may make you feel over- tired and affect your ability to do exercises the next time you attempt them.

- If you have a bad day, try not to let this upset you. Everyone feels like that at times, but this does **not** mean you aren’t improving.

- **Stop the exercise** immediately if you feel dizziness, chest pain/ tightness or much more breathless than usual.

- **Stop the exercise** immediately if you feel joint or muscle pain during the exercise.

- Try and keep track of when you complete your exercises so you can see your progress.

The exercises in this booklet are separated into:

1. Bed exercises
2. Chair exercises
3. Standing exercises

Please complete the ones that have been prescribed by your Physiotherapist.
1. Bed Exercises

*Remember to exercise both legs*

- **Static Quadriceps**
  - Put your legs out straight in front of you. Pull your foot up towards you and push your knee down into the bed.
  - *Hold for 5 seconds*. Repeat.
  - Repetitions..... Sets.....

- **Straight Leg Raise**
  - Bend one knee up so your foot is on the bed. Straighten your other leg and lift off the bed a few inches.
  - *Hold for 3 seconds* and slowly relax the leg back down. Repeat.
  - Repetitions..... Sets.....
**Inner Range Quads**

Put a rolled up towel under your knee. Tighten your thigh muscles and lift your heel up from the bed until your knee is straight.

**Hold for 5 seconds** then slowly lower your heel back down to the bed. Repeat.

Repetitions..... Sets.....

**Hip and Knee Flexion**

Bend your knee up in front of you keeping it in midline to your body. Bend it up as much as you can. Then slowly lower back down to the bed.

Take care not to drag your heal.

Repeat.

Repetitions..... Sets.....
Ankle flexion

Pull your foot up towards you as much as you can, then point your foot away from you.

Repetitions...... Sets.....

Bridging

Bend your knees up so your feet are flat on the bed. Using your bottom and leg muscles, raise your buttocks up off the bed, pushing equally through both legs. Keep your pelvis level.

Hold for 5 seconds.

Slowly lower back to the bed. Repeat.

Repetitions...... Sets .....
2. Chair Exercises

☐ Knee Extension

Pull your toes up and straighten your knee. **Hold for 5-10 seconds.**
Slowly lower and relax. Repeat.

Remember to exercise both legs.

Repetitions….. Sets …..

☐ Seated Marching

Lift your leg off the seat keeping your knee bent. Return to the starting position.

Repeat on alternate legs.

Repetitions….. Sets …..
Adductor Squeeze

Place a towel in between your knees. Squeeze the towel with the insides of your thighs.

*Hold for 5-10 seconds.* Repeat.

Repetitions….. Sets ..... 

Shoulder Abduction Stretch

Lift your arm up to the side letting the thumb lead the way.

Repeat on alternate arms.

Repetitions….. Sets ..... 

Ball Around Body

Sit forward in the chair and pass the ball around your waist.

Repeat.

Repetitions….. Sets .....
3. Standing Exercises
The following should be performed in standing. Have a chair behind you in case you need to rest

- **Sit to Stand**
  Stand from the chair using both arms to help you get up.
  Repeat.
  To progress this exercise, just use one arm and then progress to no arms.
  Repetitions….. Sets …..

- **Squats**
  Keeping your back straight, bend your knees and push your legs straight again.
  Position yourself near a fixed surface approximately waist height for balance if needed.
  Repeat.
  Repetitions….. Sets …..
Standing Spot March
Standing tall behind a chair, resting hands on the back of the chair, march on the spot.

Repetitions..... Sets ..... 

Hip Extension
Standing tall behind chair, squeeze your bottom together and move the one leg behind you at a time.

Hold for five seconds. Repeat.

Remember to exercise both legs.

Repetitions..... Sets ..... 

Hip Abduction
Standing tall behind chair, slowly move one leg out to the side.

Hold for five seconds. Repeat.

Remember to exercise both legs.

Repetitions..... Sets ..... 
Patient Information

Heel Raises

Standing tall behind chair, slowly go up onto your toes and then lower.

Repeat.

Repetitions….. Sets ….
Managing Breathlessness

Breathlessness is an awareness of difficult or uncomfortable breathing. Feeling breathless is a normal and healthy response to an increase in physical activity. However, sometimes people are breathless when they are not exerting themselves, and this can be uncomfortable and upsetting. It is important to remember breathlessness in itself is not harmful and you will recover your breathing.

Below are some strategies to help with how you think, feel and behave when breathless. This should help you learn to regain control of your breathing.

The Cycle of Breathlessness

Breathlessness can sometimes lead to anxiety and panic. Sometimes this anxiety can cause you to do less activity, and affect how you breathe which will only make you more breathless. This can end up becoming a vicious cycle, as demonstrated below.

**Do not** avoid doing things that make you breathless, just take part in activity that increases breathlessness in a controlled way. Use the advice and strategies in this leaflet to independently recover and control your breathing.
Patient Information

Information adapted from Cambridge Breathlessness Intervention Service with kind permission.
Pacing yourself and saving energy

These are several changes you can make to everyday life to help manage your breathlessness:

- Slow down, take your time, do not rush to get the task done before you get breathless
- Pace individual activities, little and often, including mobilising, taking the stairs, washing, drying and dressing. Stop each activity to rest and recover before you become too breathless
- Listen to your body, be aware of your limitations
- Avoid holding your breath. People often do this when bending, taking the stairs, or rushing to get an activity done, but this will make you feel more short of breath
- Plan your day so you don’t try to fit too much in, allow plenty of time to carry out tasks, and prepare by gathering everything you need before starting
- Think about the order in which you want to do your tasks. Make sure you complete the most important ones first, and consider spreading other tasks over a few days or asking for help
- Consider sitting down during tasks like cooking and personal care
- After a shower or bath, sit in a towelling robe to dry and rest before dressing
- Try to wear loose clothing and dress your lower body first as this uses the most energy
- Try not to bend down too much. Use long handled aids like a helping hand, long handled shoe horn or a long handled wash aid
- Simplify tasks by using devices, such as an electric tin opener or whisk.
- Consider a walking aid to brace shoulders/arms for breathing and energy support
Patient Information

- If going up and down stairs, try putting both feet onto one step, breathe in when standing on the step and out as you step up to the next one. Consider having a chair at the top or bottom of the stairs for resting.

- Use cooling therapy, such as a hand held, desktop or floor standing fan. Open doors or windows to allow a gentle breeze, or use a cold wet flannel or mist water on your face.

- If you are less breathless, you will recover quicker and therefore be less fatigued.

Focused Breathing Techniques

The following strategies can be used separately or together to help control breathing when completing activities.

1. **Pursed lip breathing** – Breathe in gently through your nose, then purse your lips making them into a narrowed ‘O’ shape and blow out, as if trying to whistle or blow out candles. Focus on trying to make the ‘out’ breath longer. You will find the ‘in’ breath takes care of itself. This technique keeps your airways open as you breathe out, allowing your lungs to empty properly, creating room for the next breath.

2. **Blow as you go breathing** – Breathe in before you make an effort and breathe out as you make the effort. This is useful when bending, lifting, reaching, standing from a chair, or each step upstairs. For example, if you bend down to pick something up; breathe in beforehand and out as you lift the item. It may be helpful to breathe out through pursed lips.

3. **Paced breathing** – Pace your breathing to your activity. This is useful during rhythmical or repetitive activities, like walking or climbing stairs. For example, when walking, breathe in for a step and breathe out for the next two steps. You can change the rhythm depending on what works for you. It may be helpful to breathe out through pursed lips.
Patient Information

Resting and Recovery Positions
Adopting certain positions can help you take control of your breathing. The positions outlined below help to stabilise your shoulders, allowing your diaphragm more room to move, and making your breathing more efficient.

Sitting
Lean forwards, placing your elbows onto your knees or a table. Pillows or cushions on the table can make it into a comfortable resting position. Alternatively, you can sit upright in a chair with a firm back; rest your arms on the chair arms or your thighs and make your wrists and hands go limp to help you relax.

Information adapted from Cambridge Breathlessness Intervention Service with kind permission

Standing
Lean onto any fixed surface such as a wall, railing, windowsill or worktop. You can also brace through a walking aid, shopping trolley or long umbrella. Alternatively, you can support yourself by placing your hands on your hips, belt loops or handbag. Try to avoid slumping.
Lying
Lie on your side with pillows to support your head and shoulders. You may also choose to place a pillow beneath your top arm or leg for comfort. Alternatively, sleeping propped up with pillows especially a v-pillow can help.
Recovery Breathing Techniques

If you are unable to control breathing during activity, stop and rest, stop talking, sit down if possible or use the recovery positions previously mentioned. The following strategies can then be used separately or together to help control breathing when recovering from activities.

1. The three ‘F’s
   - **Fan** – Cool air to the nose and mouth area can reduce the feeling of breathlessness. Hold a small hand held fan 10-15cm from your face. Aim the fan towards the central part of your face around your nose and above your top lip, keeping it still. You may feel better straight away or you may need to use the fan for 10 minutes or so before the effect is felt
   - **Forward** – Lean forwards onto your arms on a table or wall
   - **Focus** – Think about your breathing and block out any distractions. Focus on breathing out. You will find the ‘in’ breath comes naturally. As you start to feel better, try to lengthen the ‘out’ breath

2. Pursed lip breathing (see focused breathing techniques section above)

When your breathing has eased, stay seated/ rested for a few moments before moving again.

Things to Consider

Many people think that feeling breathless must mean they need more oxygen. This is not necessarily the case. Sometimes breathlessness has nothing to do with the level of oxygen in your blood, and oxygen does not always relieve breathlessness.

It is also common for people to feel they will never recover their breathing. Although breathlessness can be unpleasant and upsetting, it is rarely harmful; you will continue to breathe and recover and your breathing will settle.

For both these common thoughts you should try to learn strategies that allow you to think and behave in a more positive way. Some ideas are listed in this booklet and may help you independently recover and control your breathing.
Patient Information

Swallow
If you are feeling short of breath, you may notice your breathing becomes more difficult when eating and drinking. When we swallow, we all automatically hold our breath which can make us feel more breathless. The following tips may make eating and drinking easier and more comfortable for you:

- **Make sure you are sat upright when eating and drinking.**
- **Take small amounts of food and drink** as this will be easier for you to swallow and less demanding.
- **Choosing foods which require little or no chewing** may make it feel less effortful e.g. cottage pie, the filling of a jacket potato, yogurts, mousses.
- **Have smaller meals with regular snacks**; this may be a change in routine but you may find this less tiring.
- **Take your time**; make sure you rest between each mouthful to get your breath back.

Communication
You may find that your communication changes in one or more of the following ways:

- Your voice is quieter and you run out of breath before you have finished speaking. This may be due to the breath support that is needed to produce speech.
- You may also find that your voice sounds different, especially if you have been intubated.
- Your speech sounds slurred when you are tired.

Below are some strategies which may help you:

- **State the topic** at the beginning of your conversation to help listeners understand.
- **Allow extra time** for conversations so that you are not rushed.
- **Give positive feedback** when your messages are clearly understood e.g. thumbs up, nodding.
- **Start talking as you start breathing out.**
Patient Information

- **Do not carry on talking when you have run out of breath**; take another breath and continue your sentence.
- **Breaking your speech into single words or short phrases** may be beneficial to you and your listener.
- **Ensure you are in the same room as the person you are speaking to.** This will save you having to raise your voice and put extra strain on your voice box.

Here are some tips for the person you are speaking to:

- **Repeat key words** to confirm the important aspects of the message. Consider writing them down so they can point to the key words during the conversation.
- **Recap the part of the sentence which you have heard** so the person talking does not have to repeat everything they have said.
- **Give your full attention to the person talking.**
- **Provide choices or ask questions which can be answered with yes/no** if the person is feeling very fatigued.

Here are some environmental changes which may help:

- **Avoid noise and other distractions**, such as the TV or other people talking.
- **Try and focus on one task at a time**; for example do not try to walk and talk if you become very tired. Focus on talking when you are sat down resting.

**Looking after your voice**

After a long period of coughing, your vocal cords may be swollen and inflamed which affects how your voice sounds.
Below are some tips to help your vocal cords (voice box) recover and heal:

- **Keep well hydrated.** Drink 1½ – 2 litres (4 – 5 pints) of fluid that doesn’t contain caffeine or alcohol per day (unless advised otherwise by a doctor).
- **Try gentle steaming with just hot water.** Breathe in and out gently through your nose or mouth. The steam should not be so hot that it brings on coughing.
- **Try not to clear your throat too often. If you really have to clear your throat, do it very gently.** Taking small sips of cold water can help to reduce the urge to cough.
- **Promote saliva flow by sucking sweets or chewing gum.** This lubricates the throat and can help to reduce throat clearing.
- **Avoid medicated lozenges and gargles,** as these can contain ingredients that irritate the lining of the throat.
- **Always aim to use your normal voice.** Do not worry if all that comes out is a whisper or a croak; just avoid straining to force the voice to sound louder. Do not whisper as this puts the voice box under strain.
- **Avoid smoking or vaping.**
- **If your voice is no more than a whisper do not attempt telephone or video conversations.** Once the voice starts to improve, avoid telephone or video conversations which last more than 5 minutes. Try to use text-based options instead.
- **Take a break from talking when your voice gets tired;** this gives the vocal cords time to recover. You may notice that your voice becomes tired more quickly than normal. This is to be expected.
- **Avoid greasy and acidic foods and drinks** including caffeine and alcohol. These can cause acid reflux, which can irritate the voice even further. It may also help to take a liquid alginate (e.g. Gaviscon Advance) after meals and before bed.
- **Until your voice has returned to normal it is best to avoid activities** such as shouting and singing.
Psychological wellbeing

Being in hospital can be a difficult time for you and your family – even more so following admission due to Covid-19 which is likely to have been a time of uncertainty, confusion and worry. This part of the leaflet will help you understand how to cope with the emotional impact of being unwell with Covid-19.

During your stay, you may have physical symptoms such as breathlessness, but you might also experience some psychological symptoms such as anxiety and low mood. The following diagram shows some of the feelings you might have during your recovery.

**PHYSICAL**
- ongoing breathlessness
- fatigue
- muscle weakness
- disturbed sleep patterns
- vivid dreams and nightmares

**EMOTIONAL**
- feeling overwhelmed
- feeling more fearful and anxious
- feel low in mood
- you may be scared of stigma or worried about passing illness on to others
- mood swings & irritability

**COGNITION**
- feel confused and disorientated
- problems concentrating
- struggle to remember things
- difficulty processing information

**BEHAVIOUR**
- wanting to stay in bed
- not wanting to talk to people
- not wanting to do rehab exercises
- restless and unable to relax

---

Recovery and Rehabilitation after COVID-19  www.uhcw.nhs.uk  29
Patient Information

Please remember, not everyone will have difficulties, and some may have positive changes, such as a desire to help others, or having a new meaning to life.

It is very normal to have a range of thoughts and feelings during this time

Some people experience severe confusion during their illness, especially those who have been in intensive care or have needed a machine to support their breathing. This is known as delirium and can be very frightening for you and your family. However, these symptoms usually resolve in time and may be present when you are discharged home. It is important to understand that recovery can take time.

The provision of information and psychological care you receive in and out of hospital will be as follows –

As an inpatient –

- All staff involved in your care will help you to understand your symptoms, treatment and the environment you are in which should help to relieve any fear or anxieties that you have.
- If you have been in intensive care, it can seem daunting being moved to another ward – however, remember this is a positive thing as you are getting better and no longer need such specialist care.
- Staff are aware that you may feel anxious moving to another ward, but please be reassured they will have had information about your care handed over to them, and will continue to provide you with the care that you need.
- Should you be having difficulties dealing with emotional, cognitive or behavioural changes, the staff will seek advice from the inpatient Neuropsychology Service.

Before Discharge –

- All staff involved in your care will help you to understand your symptoms, treatment and the environment you are in – which should help to relieve any fear or anxieties that you have.
- Before hospital discharge, staff will give you any relevant verbal and written information to take away with you, all of which should enhance your recovery
- Please remember to ask any questions you want to about your care, discharge or other important issues to you
- Any follow-ups or onward referrals will be discussed with you before discharge. These may be with a range of healthcare professionals.
Looking after yourself

It is important that you are able to look after your physical AND emotional wellbeing once you leave hospital. Please remember, it is normal to feel worried about covid-19. This is an uncertain time and you might feel lonely, bored, anxious, low in mood, frustrated, or fearful. Remember that for most people, this will pass. Here are some things that you can do to look after yourself at this time:

- Stay connected with your family and friends
- Talk about your worries
- Eat healthy meals and drink enough water
- Keep physically active
- Don’t drink too much alcohol
- Try and keep a regular sleep pattern
- Ask for help if you need it
- Keep to a routine
- Keep your mind active/ maintain your psychological fitness but don’t become overwhelmed by information overload
- Get as much sunlight and fresh air as possible
- Find ways to relax and be creative.

If you do find yourself having unhelpful thoughts/ feelings you can seek help from the following services;

Samaritans – Tel: 116 123
Mind Helpline – Tel: 0300 123 3393 or 0116 278 0865
Every Mind Matters [www.nhs.uk/oneyou/every-mind-matters](http://www.nhs.uk/oneyou/every-mind-matters)

As you start to recover and feel less fatigued, you may feel that your ‘thinking skills’ have changed e.g. memory, reasoning, thinking through more difficult situations. These may impact on your ability to return to any hobbies or work, as well as your social and family life. It may be that you are less aware of these changes than your family.
Mouth care

Your mouth is one of the entrances to the body and contains bacteria. Cleaning your teeth regularly is important as it reduces the build-up of bacteria. You may feel like your mouth is dry, particularly if you wear a mask to help with breathing. Keeping your mouth clean and well hydrated is really important to reduce the risk of any further infection and keep your mouth feeling comfortable.

You may find the following advice useful:

- **Brush your teeth twice a day.** Make sure you use toothpaste but take your time if you feel breathless.
- **Remove dentures to clean these and your mouth every day.**
  Dentures are best cleaned with soap and water, but continue with toothbrush and toothpaste for your gums and tongue.
- **Remove your dentures overnight** to allow the lining of your mouth to recover.
- **Drink plenty of water regularly throughout the day.**
- **Use lip balm if your lips feel dry.** Try to avoid Vaseline as this can seal in any dryness; other brands may be better at moisturising.
- **Continue to use any moisturising mouth gels which you have been prescribed on discharge** e.g. Oralieve gel, BioXtra gel.
Patient Information

Contact details for support groups

Community Support: This is a mobilised service for people who are vulnerable and require additional support (such as emergency food/shopping etc).

Contact Details: 08085 834333 or 024 7518 5950.

Emergency Food Networks: These Emergency Food Networks are run by the voluntary and community sector will tailor their offers to the needs of their local community but ensure the following are provided in each area:

- Foodbank.
- Free School Meals
- Neighborhood food and support: They provide a variety of neighborhood services such as supporting people with shopping and pharmacy supplies, providing cooked and frozen meals, and befriending.

Contact Details: 08085 834333 – to access the Food Network for patients.

The table below has details for a range of services in the Coventry area which you may find useful.

<table>
<thead>
<tr>
<th>Specific Issues</th>
<th>Contact Details:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Information for Carers</td>
<td>Equipment Support - 024 7663 2972</td>
</tr>
<tr>
<td></td>
<td>Continuation of Care if I have symptoms call - 024 7683 3003</td>
</tr>
<tr>
<td></td>
<td>Carers Response and Emergency Support Service (CRESS) - 024 7625 8816 option 1</td>
</tr>
<tr>
<td>Financial Support</td>
<td>Council Tax and Hardship Fund - 024 7683 1111</td>
</tr>
<tr>
<td></td>
<td>Benefits Support - 024 7683 1800</td>
</tr>
<tr>
<td></td>
<td>Support grants or crisis awards - 024 7683 3773</td>
</tr>
<tr>
<td></td>
<td>Coventry Law Centre – supporting people</td>
</tr>
</tbody>
</table>
**Warwickshire County Council** also has the following services available for **Warwickshire residents** only. More information can be found here: [https://www.warwickshire.gov.uk/coronavirus](https://www.warwickshire.gov.uk/coronavirus)

They also have a Covid-19 Hotline to support individuals who are isolated without the support from family, friends and neighbours. This hotline is particularly targeting those that require shielding. This service provides the following:

- food and essential household goods parcels
- medication delivery
- community groups
- financial support
- mental health and wellbeing advice
- local volunteer networks
- housing support
- health and social care information.

**Telephone Number - 0800 4081447**

**Operating Hours** –
- Monday to Thursday - 9am to 5pm
- Friday - 9am to 4.30pm
- Saturday and Sunday – 9am to 3pm
Warwickshire county council has set up a telephone service for those that are vulnerable in the community who may require additional support offers. This service is aimed at those that are not in the shielded category.

Telephone Number - 01926 410410
Operating Hours -
- Monday to Thursday - 9am to 5pm
- Friday - 9am to 4.30pm

**Wellbeing for Warwickshire** – in order to help you cope during this period, the Wellbeing for Warwickshire Hubs will be offering telephone support to anyone who feels they are in need of contact. All telephone support will be offered between the usual hours of 1pm-5pm every day and the team can even book you in for a call if needed. Call **02476 224 417**.

**Warwickshire Safe Haven** are offering support for people (18+) who are feeling distressed and overwhelmed in the evenings (6-11pm).

Call 02477 714 554 or email **safehaven@cwmind.org.uk** *(Thursday – Sunday only)*

The Trust has access to interpreting and translation services. If you need this Information in another language or format please contact us and we will do our best to meet your needs.

The Trust operates a smoke free policy

---

**Document History**

<table>
<thead>
<tr>
<th>Department:</th>
<th>Therapy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact:</td>
<td>26013</td>
</tr>
<tr>
<td>Updated:</td>
<td>June 2020</td>
</tr>
<tr>
<td>Review:</td>
<td>June 2021</td>
</tr>
<tr>
<td>Version:</td>
<td>1.1</td>
</tr>
<tr>
<td>Reference:</td>
<td>HIC/LFT/2437/20</td>
</tr>
</tbody>
</table>