

Poster 28

ROYAL COLLEGE of PHYSICIANS of EDINBURGH

Delirium Association/Royal College of Physicians of Edinburgh Joint Conference on Delirium 5 and 6 September 2019



# **Improving Delirium Recognition in Ward 2** East

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With an increasing ageing population and more complex medical and surgical interventions delirium is an increasing risk for patients in acute care. People who develop delirium have poorer outcomes, experiencing longer hospital stays, loss of independence, long term psychological problems, higher risk of dementia and increased mortality 1 year post delirium.

Due to the care provided at the Golden Jubilee National Hospital it could be described as a "perfect storm" for delirium. Those at high risk being over 65, people with existing dementia, hip fracture/surgery, surgery and ICU stay,

In my role as Lead Nurse for Dementia, I am passionate about ensuring that people living with dementia are able to benefit fully from the care we provide and as a nurse, all patients in our care have their risk of harm minimised. Visiting our ward areas I could see wide variations in the recognition of delirium.

Aim : To improve accuracy of Single Question in Delirium answer for patients in Ward 2 East to 95 % by March 2019.

### Method

A project team consisting of Ward 2East Senior Charge Nurse, Registered Medical Officer, Dementia Champion, Advanced Nurse Practitioner and Best Practice in Dementia Care Healthcare Support Worker was identified. The team developed a process map of the current System. A Staff Survey was carried out to identify gaps in knowledge.

Developing a driver diagram identified a number of change ideas to test. The



is being tested. Information sessions were completed to improve staff knowledge

A Delirium information board was developed

Process Chang

and confidence.

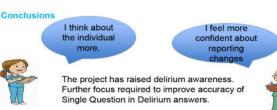
Results

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by Dementia Champion.

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## Key Learning Point

- Time spent understanding current system is essential for focusing change ideas.
- Start small
- As an improvement leader maintaining team momentum is crucial
- Always identify team member to continue progress in your

absence introduction of the Single Question in Delirium to the care rounding document . There is always time for fun.



## Next Steps

Further PDSAs planned for 2E- Planned redesign of Care Rounding document to support HCSW. Expand testing to 2W.

Use coaching skills to support candidates undertaking Dementia Course. Teaching Model for Improvement to Dementia Champions. Using skills and tools to support role in future projects.

## Achievements

Raised awareness of delirium generally at Golden Jubilee. Developed new relationships at Golden Jubilee.

Increased confidence to initiate challenging conversations. Understanding the importance of data throughout improvement project. Improved Excel skills

#### **Reference Materials** Delirium Toolkit http://www.knowledge.scot.nhs.uk/

improvingcareforolderpeople/resources.aspx



# Contact: Tilda McCrimmon

Completion of S.Q.I.D. question has been consistent. However when

measuring accuracy further P.D.S.A. are required. Despite data for accuracy being within control limits, due to the nature of testing site inaccurate results

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represent all patients with confusion in testing period.

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