

Managing behavioural and psychological symptoms of dementia and delirium



Synopsis

This simulation aims to equip allied health professionals with skills in how to respond to patients who present with behavioural and psychological symptoms associated with dementia and delirium. There is a particular emphasis on developing a team approach to managing these presentations. Clinical specialists and educators may also find that they can adapt this simulation to suit differing clinical settings such as patients with a brain injury or a mental health condition. It can be individually facilitated or co-facilitated. The simulation can be conducted in a multi-purpose room, simulation centre or on a ward.

Learning Objectives

By the end of the simulation, participants will be able to:

1. Expand or enhance communication skills with patients who have behavioural and psychological symptoms of dementia and delirium
2. Communicate across disciplines about patients who have behavioural and psychological symptoms of dementia and delirium
3. Demonstrate key skills and strategies to assist in the management of patients who have behavioural and psychological symptoms of dementia and delirium
4. Develop an interdisciplinary team approach to manage patients who have behavioural and psychological symptoms of dementia and delirium.

Target Audience

Allied health professionals from a range of disciplines may find this simulation useful. In particular, this simulation is written to include qualified occupational therapists, physiotherapists, social workers and speech pathologists who are working in multidisciplinary teams. Not all disciplines have been included in this scenario; however disciplines can be added or subtracted depending on local needs (e.g. dietetics, psychology, pharmacy, diversional therapy). While this scenario has been developed for allied health professionals, some adjustments can be made to include medicine and nursing in the simulation. This scenario has been written for health professionals early in their career; however it can be adapted in complexity depending on the learners' needs. For example:

- To increase complexity for more experienced staff, risk factors may be introduced such as suspected elder abuse.
- To reduce complexity for undergraduate students, participants may work in pairs to share the responsibility of the clinical assessment task.

Managing behavioural and psychological symptoms of dementia and delirium

Continued

Simulation activity

In this simulation, participants will enter a simulated ward environment. They will first attend a brief journey board meeting where the Nursing Unit Manager (NUM) will provide handover of the two patients who have been transferred on to the ward.

Following the journey board meeting, the participants will visit the patients, either individually or in pairs, to conduct their clinical assessment.

Helena (simulated patient) is an 85 year old female patient presenting with a delirium. She was admitted following a fall at home in the context of increasing confusion and reduced oral intake over the last week.

Barbara (simulated patient) is a 68 year old female patient with Frontotemporal Lobar Degeneration who was brought to the emergency department. She was admitted with a urinary tract infection and had been refusing food.

It is expected that participants will be able to employ strategies to manage the patients' behavioural and psychological symptoms, while conducting their clinical assessment. These strategies will be presented in the education session preceding the simulation activity.

Following the clinical assessment, the participants re-convene at a multidisciplinary team meeting, facilitated by the NUM, to discuss team approaches to manage the patients' behavioural and psychological symptoms on the ward. Participants then engage in the debriefing following the simulation.

Managing behavioural and psychological symptoms of dementia and delirium

Duration 3.5 hours

Faculty 1 x Facilitator
2 x Confederates [Nursing Unit Manager (NUM) / Family member on the telephone]
2 x Simulated patients (Helena and Barbara)

Participants 4 participants from the disciplines of occupational therapy, physiotherapy, social work and speech pathology.
NB – The number of participants can be increased by including observers into the simulation. Observers can be tasked with observing and providing feedback, either generally or on specific aspects of the simulation.

Authors

Craig Slater	Senior Program Officer – Allied Health Portfolio, HETI
Daniella Pfeiffer	Senior Program Officer – Allied Health Portfolio, HETI
Lauren Christie	Health Professional Educator- BIRU, South Western Sydney LHD
Melissa Loos	Social Work Educator, Western Sydney LHD
Virginia Mitsch	Occupational Therapy Advisor, Murrumbidgee LHD



Educators and clinicians who would like to offer this simulation can access the complete package on the **HETI website**. Supporting documentation includes:

- PowerPoint Presentation
- Facilitator Session Plan
- Participant Briefing Notes
- Confederate Briefing Notes – Nursing Unit Manager
- Confederate Briefing Notes – Family Member
- Simulated Patient Briefing Notes – Barbara
- Simulated Patient Briefing Notes – Helena
- Sample Medication Chart
- Sample Progress Notes for the Medical Record

Facilitators can print off copies and distribute the relevant documentation to faculty and participants.

Managing behavioural and psychological symptoms of dementia and delirium

