



Specialising in delirium and dementia: a cross-sectional study



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Do patients with delirium and dementia who are provided with an Individual Patient Special (IPS) have nursing assessments conducted in clinical practice?

Aim: Few studies have examined the model of providing an IPS to patients who present to hospitals with delirium and dementia. This study measured rates of nursing admission assessments and adherence to IPS policy and procedure at a rural hospital.

Method: A quantitative retrospective medical record audit was conducted using consecutive sampling of specialised patients that were admitted to a rural 270 bed hospital over an 18 month period from June 2012 to January 2014. Inclusion criteria were patients aged 65 and over with a diagnosis of delirium and dementia who were specialised (n=150). Patients with a psychiatric illness and high dependency patients were excluded.

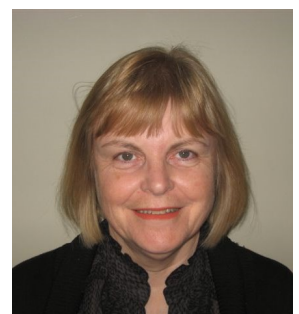
Results: The audit demonstrated low rates of completion of compulsory admission assessments for patients with delirium (21%) and dementia (20%) and low referral rates to Medical Team or Specialist Nurse for more expert care (23%). Results for compliance with the IPS model were mixed with good outcomes in completion of the daily patient behaviour chart (83%) and daily Medical Officer review (100%). Results revealed low completion rates for the reassessment process for the need for an ongoing special at 48 hours (30%).

Conclusion: Results indicate that the care of confused patients with challenging behaviour is complex and that compulsory admission assessments aren't attended for all patients. Changes to the IPS policy and procedure to reflect a therapeutic rather than a custodial model is recommended. The development of criteria to cease an IPS may result in reduced length of stay for IPS patients.

Implications for future practice: The demand for the IPS model is likely to increase as the population ages and the prevalence of delirium and dementia increases. It is important for health service providers to evaluate care provided to patients to ensure optimal, cost effective outcomes.

For the full report on this project visit our website, follow the link to the Rural Research Capacity Building Program and click on 'view completed projects'

Kerry is a Clinical Nurse Consultant in Discharge Planning at Coffs Harbour Health Campus. Kerry has a Bachelor of Applied Science, a post graduate diploma in Geriatrics and a Master of Aged Care. Kerry has worked across all health care settings including public, private and community health. Areas of interest include aged care, palliative care and medical nursing.



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