CARING FOR COGNITIVE IMPAIRMENT



System for caring for cognitive impairment

A well-designed system for caring for patients with for cognitive impairment will support clinicians to:

- Routinely screen for cognitive impairment in patients aged 65 years or over using a validated tool
- Screen patients of any age at risk of delirium and when the patient, carer, family or other key informants raise concerns about cognitive impairment.

For all patients with cognitive impairment:

- Assess for delirium and reassess with any changes to behaviour or thinking using validated delirium assessment tools applicable to the setting
- If delirium is detected, investigate and treat the causes of delirium;
- Investigate (or refer for investigation) other causes of cognitive impairment;
- · Partner with patients, carers and family members
- · Comprehensively assess and develop an individualised plan
- Provide relevant information to patients, carers and families
- **Respond to other care needs**, including assistance with nutrition and hydration reorientation, safe mobilising, maintaining or restoring functioning, and providing meaningful activities
- Set goals of care
- Manage medication issues
- Communicate effectively and seek information to provide individualised care
- Respond appropriately to behavioural symptoms
- Provide a supportive environment
- Manage transitions effectively

For patients at risk of delirium:

Implement multi-component delirium prevention strategies

For all patients:

• **Be alert** to and assess for delirium when changes in behaviour, cognitive function, perception, physical function or emotional state are observed or reported

Note that these steps are not linear. For example, keeping a person safe should happen at the same as investigating the possible cause of delirium, if detected.

Further information is available in the NSQHS Standards (second edition) draft Guide for Hospitals.

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