

Caring for Cognitive Impairment Campaign

Webinar No 1

11 May 2016

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Overview

- Inform participants of the Commission's Caring for Cognitive Impairment Campaign
 - Provide the background context
 - Describe the link to the NSQHS Standards
 - Describe the key elements of the campaign
 - Discuss how you can be involved

Australian Commission on Safety and Quality in Health Care

- To lead and coordinate national improvements in the safety and quality of health care
- Initially established in 2006
- Commenced as statutory authority in July 2011
- Main functions:
 - provide health ministers with strategic advice
 - develop and support national safety and clinical standards
 - formulate and implement a national accreditation scheme
 - develop national health-related data sets
 - work to reduce unwarranted variations in practice and outcomes
 - undertake nationally coordinated action to address healthcare associated infections and antimicrobial resistance

CARING FOR COGNITIVE IMPAIRMENT



Cognitive Impairment

is an important safety and quality issue for all Australian hospitals



Patients with cognitive impairment such as dementia and/or delirium have more falls, pressure injuries and functional decline



Dementia and delirium are poorly recognised



30-40% of delirium cases can be prevented



Learn how to recognise cognitive impairment



Prevent delirium



Act to keep people with cognitive impairment safe

**We can
all make a
difference**

Patient story

87 year old woman with dementia who is a resident of an aged care facility has a fall and fractures her right femur and is transferred to the local hospital....

Postoperatively, her daughter raise a number of concerns, which were dismissed...

During the night, patient climbs over the bed rails, falls, fracturing her left femur and damaging her right leg.



What did not go well?	What went well?
✘ No falls risk assessment.	✔ Daughter informed clinicians that mother had dementia.
✘ Change in condition not acted on.	✔ Daughter raised concerns about the risk of her mother falling.
✘ No subsequent delirium assessment.	
✘ Use of bedrails.	
✘ Bed not in a low position.	
✘ Daughter's (carer's) safety advice ignored.	
✘ False reassurance.	
✘ Clinicians not understanding care needs.	
✘ Patient's bed not easily visible to nursing staff.	
✘ Daughter not informed of fall.	

What could have been done better?
✔ Clinicians recognising and documenting existing dementia.
✔ Clinicians undertaking further assessment and developing an individualised prevention and management plan to address safety issues.
✔ Implementing an individualised prevention and management plan, including regular assisted toileting and environmental modification – low bed, closer to nurses' station.
✔ Engaging carer, and taking carer concerns seriously and acting on them.

Cognitive Impairment Program

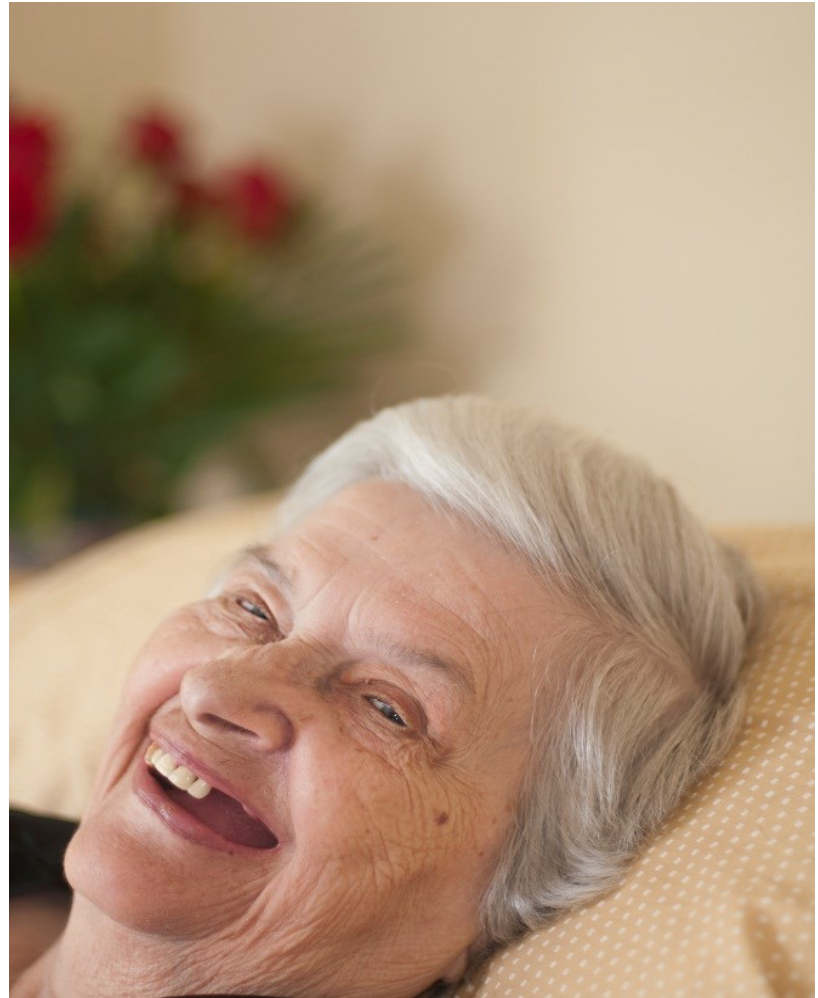
Main areas:

1. Collation of evidence and best practice into resources for health service managers, clinicians and consumers, ***A better way to care***
2. Collaboration on the development of clinical care standard for delirium
3. Incorporation of cognitive impairment in the current NSQHS Standards as part of the Standards review process
4. Call for action campaign to encourage improvements in the prevention, recognition and care of people with dementia and delirium in hospitals across Australia

Safety and Quality Pathway

Step 1

Be alert to delirium and the risk of harm for patients with cognitive impairment



Safety and Quality Pathway

Step 2

Recognise and respond to patients with cognitive impairment



Safety and Quality Pathway

Step 3

Provide safe and high-quality care tailored to the patient's needs



Caring for Cognitive Impairment

- Screening
- Delirium assessment
- Re-assessment with change
- Partnering with patient, carer and family
- Delirium prevention
- Communication
- Environment



Watch video <https://www.youtube.com/watch?v=0IsFYycfzN8>

ON MY MIND: HIGH QUALITY CARE

A better way to care

Safe and high-quality care for patients with cognitive impairment (dementia and delirium) in hospital



Actions for consumers

AUSTRALIAN COMMISSION
ON SAFETY AND QUALITY IN HEALTH CARE



A better way to care

A better way to care

Safe and high-quality care for patients with cognitive impairment (dementia and delirium) in hospital



Actions for health service managers

AUSTRALIAN COMMISSION
ON SAFETY AND QUALITY IN HEALTH CARE



A better way to care

Safe and high-quality care for patients with cognitive impairment (dementia and delirium) in hospital



Actions for clinicians

AUSTRALIAN COMMISSION
ON SAFETY AND QUALITY IN HEALTH CARE



A Better Way To Care – Actions for Clinicians

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By The Australian Commission on Safety and Quality in Health Care

Open iTunes to buy and download apps.



[View in iTunes](#)

+ This app is designed for both iPhone and iPad

Free

Category: [Medical](#)

Released: Apr 21, 2015

Version: 2.0.0

Size: 33.2 MB

Language: English

Seller: Australian Commission on Safety and Quality in Health Care

© Commonwealth of Australia 2014

[You must be at least 17 years old to download this app.](#)

Frequent/Intense

Medical/Treatment Information

Infrequent/Mild Alcohol,

Tobacco, or Drug Use or

References

Compatibility: Requires iOS 4.3 or later. Compatible with iPhone, iPad, and iPod touch.

This app is optimized for iPhone 5.

Description

For clinicians to improve the care of patients with cognitive impairment.

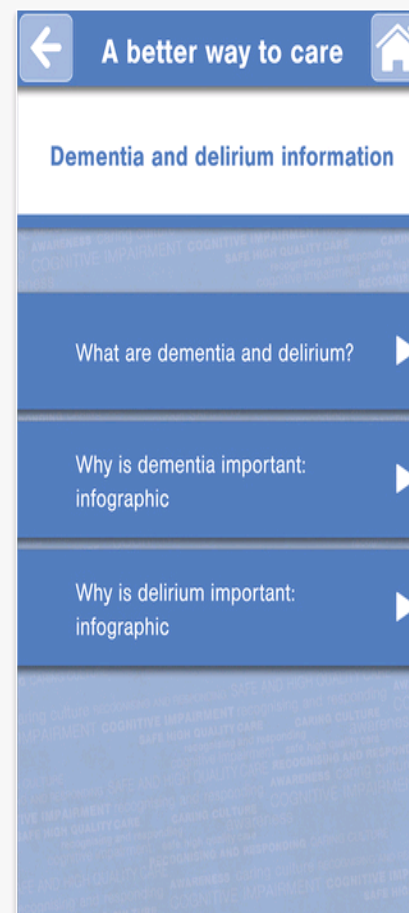
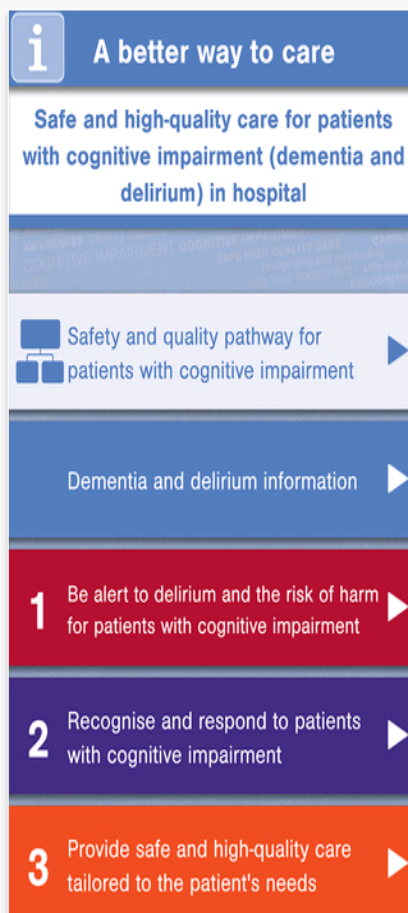
The A better way to care app has been designed to guide clinicians in identifying and providing safe and high-quality

[A Better Way To Care – Actions for Clinicians Support](#)

[...More](#)

Screenshots

iPhone | iPad



Clinical Care Standards Program

- Aim
 - to reduce unwarranted healthcare variation
 - ensure appropriate clinical care
 - improve patient experiences
 - enable shared decision making
- Work plan approved by Health Ministers in 2013
- Consist of quality statements, suggested indicators and consumer and clinician fact sheets



National Standards and Accreditation ▾

National Priorities ▾

Supporting Quality Practice ▾

Publications ▾

[Accreditation and the NSQHS Standards](#) >

[Clinical Care Standards](#) ▾

[Overview](#) >

[Antimicrobial Stewardship](#) >

[Acute Coronary Syndromes](#) >

[Acute Stroke](#)
[Delirium](#)
[Hip Fracture Care](#)
[Clinical Communications](#) >

[Cognitive Impairment](#) >

[Credentiailling for Health Professionals](#) >

[Falls Prevention](#) >

[General Practice accreditation](#)
[Healthcare Associated Infection](#) >

[Safety and Quality](#) > [Our Work](#) > [Clinical Care Standards](#) > [Delirium Clinical Care Standard](#)

Delirium Clinical Care Standard

Delirium is an acute disturbance of consciousness, attention and cognition that is common in older people in hospital. They may be experiencing delirium at the time of admission, or may develop delirium during their hospital stay. At most risk of developing delirium are people with one or more of the following risk factors for delirium:¹⁻³

- age of 65 years or older
- existing cognitive impairment, such as dementia
- sensory impairment, such as difficulty in hearing or seeing
- current hip fracture
- severe illness

About 10% of Australians aged over 70 years have delirium at the time of admission to hospital, and a further 8% develop delirium during a hospital admission.⁴ Delirium incidence varies throughout hospitals; it is particularly common among older patients admitted to intensive care or following surgical procedures, where incidence rates of more than 50% have been reported.⁵

Delirium is associated with severe complications.^{5,6} Compared with people of the same age who do not have delirium, people with delirium have an increased risk of death, increased risk of falls, a greater chance of being discharged to a higher dependency of care, and a greater chance of developing dementia.^{5,6}

Delirium is potentially preventable in about a third of people at risk.^{7,8} Early identification and management of precipitating factors (or underlying causes) is key to both prevention and management.¹⁻³ There are a large number of possible causes of delirium including new or altered medications, infections, pain, constipation, underlying medical conditions, and surgery.⁵ Often, a combination of factors is involved.⁵

Search



Clinical Care Standards

Contact us at

ccs@safetyandquality.gov.au

Version 2 of the NSQHS Standards



Clinical governance for health service organisations standard



Partnering with consumers standard



Healthcare-associated infection prevention standard



Medication safety standard



Comprehensive care standard



Communicating for safety standard



Blood and blood product standard



Recognising and responding to acute deterioration standard

Cognitive impairment – draft only

The health service organisation providing services to patients who have cognitive impairment or are at risk of developing delirium has a system for caring for patients with cognitive impairment to:

- a. incorporate best-practice strategies for early recognition, prevention, treatment and management of cognitive impairment in the care plan, including the Delirium Clinical Care Standard, where relevant
- b. manage the use of antipsychotics and other psychoactive medicines, in accordance with best practice and legislation

Cognitive impairment – draft only

Clinicians providing care to patients who have cognitive impairment or are at risk of developing delirium use the system for caring for patients with cognitive impairment to:

- a. recognise, prevent, treat and manage cognitive impairment
- b. collaborate with patients, carers and families to understand the patient and implement individualised strategies that minimise any anxiety or distress while they are receiving care

Relevance to cognitive impairment – consultation draft Version 2

Governance

- Safe environment for the delivery of care
- Support clinical practice based on the best available evidence, including... relevant Clinical Care Standards

Partnering with consumers

- Health literacy -Information that is easy to understand and use
- Partnering with consumers in their own care
 - Healthcare rights and informed consent
 - Working together to share decisions and plan care

Relevance to cognitive impairment

Comprehensive care

- Integrated and timely screening, assessment and risk identification
- End of life care

Communicating for safety

- Effective communication with patients, carers and families; between multidisciplinary teams and clinicians; and across health service organisations

Relevance to cognitive impairment

Medication safety

- Medication review

Recognising and responding to acute deterioration

- Deterioration in mental state

Next steps

- Endorsement and release of Delirium Clinical Care Standard
- Analysis of consultation feedback and revision of draft Version 2 of the NSQHS Standards
- Release of consultation Regulation Impact Statement
- Development of resources to support Version 2
- *Caring for Cognitive Impairment Campaign*

ANY QUESTIONS?

Caring for Cognitive Impairment launch

- <https://www.youtube.com/watch?v=IzSYu-LTQZc>

Key elements

- ✓ Campaign web site **cognitivecare.gov.au** with tailored commitments, key campaign messages and commitment button
- ✓ Hospital executives asked by CEO to publically commit their hospital
- ✓ Individuals pledge their commitment with tailored, easy actions
- ✓ Supporting organisations asked to support and to provide logos
- ✓ Infographics track progress
- ✓ Achievements submitted by choice
- ✓ Implementation support through resources, webinars and newsletters
- ✓ Use of social media to promote campaign
- ✓ Cognitive Impairment Advisory Group established to provide advice



Caring for Cognitive Impairment - Commit to high quality care for people with cognitive impairment in hospital, including the prevention, recognition and treatment of delirium

Cognitive impairment including delirium or dementia are common among older people admitted to hospital but are frequently missed or misdiagnosed increasing their risk of harm. Delirium can be prevented with the right care and harm minimised if cognitive impairment is identified and acted on early. Commit to caring for cognitive impairment and also learn how to prepare for the new cognitive impairment actions in the draft version 2 of the National Safety and Quality Health Service Standards. *We can all make a difference.*

 **660** Individuals
have committed to Caring for
Cognitive Impairment

 **106** hospitals
on board

When you commit to Caring for Cognitive Impairment you'll receive:

- Tailored practical action lists
- Quarterly newsletters (subscription is optional)

I COMMIT TO CARING
FOR COGNITIVE
IMPAIRMENT



Commit to caring for cognitive
impairment

Join the campaign

- As a hospital
- As a supporting organisation
- As an individual
 - a consumer
 - a health service manager
 - a health professional in hospital
 - a hospital care and support staff member
 - A person working in primary health, community or residential care

Health Professionals

- I will learn about delirium and dementia and other forms of cognitive impairment
- I will learn about screening for cognitive impairment
- I will learn how to prevent delirium
- I will learn how to keep a person with cognitive impairment safe
- I will care for a person with dementia or delirium with dignity, respect and compassion
- I will learn the best ways to reduce a person's disorientation, agitation and distress
- I will work with carers as partners in care, if they choose
- I will communicate cognitive care status and needs at transfer
-

Hospital Care and Support Staff

- I will learn about delirium and dementia and other forms of cognitive impairment
-
- I will learn how to communicate with someone with cognitive impairment

Primary Health/ community

- I will let the hospital know if the person I care for has a diagnosis of dementia or another form of cognitive impairment or if I suspect they might have some form of cognitive impairment , including delirium before admission
-
- I will learn how I can assist with preventing, recognising and managing delirium and with supporting a person with cognitive impairment in the community, including when a person transfers from hospital



Participating Hospitals

The following hospitals across Australia have committed to caring for cognitive impairment.

If your hospital is not on the list speak to your Safety and Quality Manager, General Manager or Chief Executive.

Hospitals

New South Wales

- Albury Wodonga Health
- Balmain Hospital
- Bankstown Hospital
- Batemans Bay District Hospital
- Bathurst Hospital
- Blacktown Hospital
- Bowral and District Hospital

Supporting Organisations

Caring for Cognitive Impairment is proudly supported by the following organisations. If your organisation is interested in supporting the campaign, please email cognitive.impairment@safetyandquality.gov.au





Your Stories

A story can be submitted by anyone who wants to make a difference – health service managers, doctors, nurses, allied health, hospital care and support staff, health professionals in primary health and community care, consumers, family members and carers. As people join the campaign their stories will be added and grouped into categories:

- Hospitals
- Individuals in hospitals
- Consumers
- Primary health and community

In addition stories from hospitals that are participating in the campaign are also included.

[Share your story.](#)

Central Adelaide Local Health Network

Central Adelaide Local Health Network (CALHN) is very much looking forward to championing as an early adopter the Commission's Caring for Cognitive Impairment campaign. CALHN is an incorporated hospital service that provides

**I COMMIT TO CARING
FOR COGNITIVE
IMPAIRMENT**

STORY CATEGORIES

Hospitals

Individuals in Hospitals

Consumers

Primary Health &
Community

Links to on-line courses

E-Ageing



Welcome to E-Ageing

We provide education about the ageing process and associated diseases for both medical and paramedical professionals.

Our aim is to foster positive attitudes towards older people.

- ▶ Testimonials
 - ▶ Understanding Dementia MOOC Data
 - ▶ University Qualification
 - ▶ Contact Us
 - ▶ Artist in Residence
- Wicking News
Donate to Wicking
Vale Erica Bell

QUICK LINKS

- ▶ Faculty of Health
- ▶ Medicine
- ▶ Nursing and Midwifery
- ▶ Tasmanian Healthy Brain Project
- ▶ Understanding Dementia MOOC
- ▶ Bachelor of Dementia Care

Understanding Dementia MOOC
UNDERSTANDING DEMENTIA
FREE ONLINE COURSE
WICKING | UTAS

Why do the Understanding Dementia MOOC?

With the ageing of human populations across the globe, dementia is the public health issue of the 21st century.

The University of Tasmania's Massive Open Online Course (MOOC), Understanding Dementia, is a 9 week online course that builds upon the latest in

WICKING
DEMENTIA RESEARCH
& EDUCATION CENTRE

Express your interest
in the next MOOC

Log in to access your
certificates and notes

Course Details

Download our Flyer

University Qualification

Frequently Asked
Questions

Contact Us

Facebook

NSW Health
Dementia Care
Competency & Training Network

HOME COURSES ▾ COMPETENCIES ▾ LIBRARY ▾ THE HUB ▾ membership | login

Dementia Care Competency & Training

▶ Play Introduction

NSW HEALTH DEMENTIA CARE COMPETENCY FRAMEWORK

Self Assessment

Online surveys help measure your skills

Find a Mentor

Working with your mentor set a competency

Map Evidence & Activities

Build a portfolio of evidence and develop an

Certificate of Competency

Once your goal is reached, gain a

DEMENTIA
TRAINING
STUDY CENTRES

Text size: A A

Search our website...

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Welcome to the Dementia Training Study Centres

Funded by the Australian Government, the Dementia Training Study Centres aim to improve the quality of care and support provided to people living with dementia and their families.

Learn more about us

Latest News

Upcoming Events

Australian Journal of Dementia



AUSTRALIAN COMMISSION
ON SAFETY AND QUALITY IN HEALTH CARE

Caring for Cognitive Impairment

Newsletter No 1

THURSDAY 21 APRIL

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Caring for Cognitive Impairment

Thank you for joining the campaign and being part of a community striving to make a difference for people with cognitive impairment.

To date, 96 hospital executives have made their hospital commitment to Caring for Cognitive Impairment, while 613 individuals have also committed to undertaking actions tailored to their roles. I am delighted that the Commission has partnered with 14 supporting organisations that are encouraging their members to be involved.

It was wonderful to see many of you at the recent launch of the Caring for Cognitive Impairment campaign. For those further afield, there is an opportunity to view a series of videos about the launch on the Commission's YouTube channel.



ANY QUESTIONS?

Thank you

CARING FOR COGNITIVE IMPAIRMENT



Join the campaign and make a difference
cognitivecare.gov.au #BetterWayToCare

cognitive.impairment@safetyandquality.gov.au