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**AUSTRALIAN COMMISSION
ON SAFETY AND QUALITY IN HEALTH CARE**

Caring for Cognitive Impairment

Newsletter No 9

TUESDAY 9 OCTOBER

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Message from the Commission's CEO

The [Caring for Cognitive Impairment campaign](#) is about providing better outcomes and experiences for patients with cognitive impairment in hospitals, and for their loved ones and staff who care for them. The campaign is also helping hospitals prepare for the new cognitive impairment items in the [National Safety and Quality Health Service \(NSQHS\) Standards \(second edition\)](#).

As such, it is a great pleasure to inform you of the national consultation currently open on the *NSQHS Standards user guide for health service organisations providing care for patients with cognitive impairment or at risk of delirium* and supporting documents. Further information is provided within this newsletter on how you can participate. I would like to take this opportunity to invite your feedback and I welcome you to encourage your hospital or professional organisation to provide comment.

I am pleased to share examples of work at a jurisdictional and hospital level to lead improvements in this area. In our jurisdictional feature, Safer Care Victoria reports on a large state-wide delirium point prevalence survey. I also

enjoyed reading the hospital summary from Princess Alexandra Hospital.

There are extensive resources available on the [Caring for Cognitive Impairment campaign website](#). New resources include:

- An [infographic](#) targeted at reducing inappropriate use of antipsychotics across multiple healthcare settings
- Details on initiatives from [supporting organisations including the Royal Australasian College of Physicians \(RACP\)](#), featured in this newsletter
- [All previous webinars](#) from the Caring for Cognitive Impairment campaign.

If you know of an excellent resource or an example of current good practice which is not included on the Caring for Cognitive Impairment campaign website, please email cognitive.impairment@safetyandquality.gov.au. By improving our knowledge and care practices, we can improve care and reduce the risk of harm for patients with cognitive impairment or at risk of delirium.

Regards,

Adjunct Professor Debora Picone AM

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Consultation - feedback welcomed

The Australian Commission on Safety and Quality in Health Care has developed four resources to help improve care of people with cognitive impairment and is seeking your feedback through a nationwide consultation process.

The *NSQHS Standards user guide for health service organisations providing care for patients with cognitive impairment or at risk of delirium* (the user guide) outlines the actions in the second edition of the NSQHS Standards that support safe and high quality care for patients with cognitive impairment or at risk of delirium.

To support the user guide, clinician and consumer resources are also available. These resources build upon [A better way to care](#) resources developed by the Commission in 2014, reflecting new evidence, a wider cognitive impairment scope and map to the second edition of the NSQHS Standards.

The Commission is seeking feedback on the resources. Feedback can be provided either by completing the [survey](#) or by providing a written response by email or mail. Further information about participation in the consultation process can be found on the [Commission's website](#).

Consultation will run until **2 November 2018**.

If you have any questions in relation to this consultation, please contact Anne Cumming on (02) 9126 3526 or cognitive.impairment@safetyandquality.gov.au.

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Webinar - Setting up a volunteer program in hospitals for patients with cognitive impairment

This webinar held on the 26 June 2018 provides an overview of key requirements and activities of a well-structured volunteer program, the lessons learnt in implementation and the experience of the program from a volunteer's perspective.

The webinar is available to watch online [here](#).

The screenshot shows a webinar interface with three video thumbnails on the left and a presentation slide on the right. The slide is titled 'Outline' and 'Presenters'.

Outline	Presenters
<ul style="list-style-type: none"> • Overview of key requirements and activities of a well-structured volunteer program • Lessons learnt in implementation • The experience of the program from a volunteer's perspective • Questions 	<ul style="list-style-type: none"> • Cath Bateman Dementia Delirium Clinical Nurse Consultant, Southern NSW Local Health District • Dianne van Clarke Cognitive Impairment Project Officer, WA Country Health Service - Central and Great Southern • Helen Hallett volunteer at South East Regional Hospital, Bega NSW

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Webinar - Cognitive impairment in the emergency department (ED) and intensive care unit (ICU)

Our tenth webinar, held on 11 September, will be of interest to those who would like to understand how safe and high quality care is provided in ED and ICU settings for people with cognitive impairment and at risk of delirium.

Watch the webinar [here](#).

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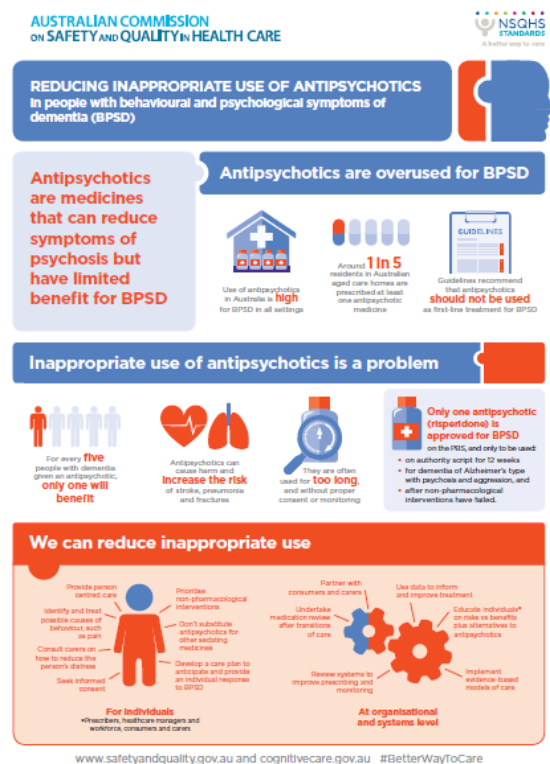
Infographic - Reducing inappropriate use of antipsychotics

As part of the [Caring for Cognitive Impairment campaign](#), the Commission has produced an infographic targeted at reducing inappropriate use of antipsychotics. It summarises why this is such an important issue for people with behavioural and psychological symptoms of dementia (BPSD) across multiple healthcare settings.

The infographic was developed as a result of work undertaken in response to the Commission's first Atlas of Healthcare Variation that found high and variable use in people aged 65 and over. The third Atlas of Healthcare Variation due for release in November 2018 will reconsider this issue.

The infographic is also available on the [campaign website](#).

Please share and promote the infographic with your networks, and feel free to print the infographic. If you would like further information, please contact cognitive.impairment@safetyandquality.gov.au or visit cognitivecare.gov.au.

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Hospital summary - Princess Alexandra Hospital, QLD

A hospital summary from Princess Alexandra Hospital has been added to the campaign website. It describes quality improvement work that has been undertaken over the last decade, which has now progressed to hospital-wide consolidation.

Some of the successful initiatives include a high care unit for cognitively impaired patients experiencing high-risk behaviours, extensive education, a network of cognitive champions, a behavioural observation chart, engagement of volunteers and environmental modification.

Read about more initiatives on the [campaign website](#).

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State initiatives - Safer Care Victoria

This feature of the newsletter highlights initiatives that are happening at a state or territory level. Victoria is our fourth state to feature. Safer Care Victoria has provided the following summary.

Safer Care Victoria is the state's healthcare quality and safety improvement agency. It works with patients, families and carers, clinicians and health services to monitor and improve the quality and safety of care delivered in the public health system. Taking the first step to understand the full extent of delirium in Victorian hospitals, Safer Care Victoria has just completed a state-wide point prevalence survey.

Conducted over four weeks, the state-wide survey involved:

- more than 5,500 patients who were assessed for delirium
- more than 400 clinicians who helped collect data
- 134 public hospitals.

Currently, the only source of information about how often patients in public hospitals experience delirium as a complication of their admission in Victoria is compiled from patient medical records. As delirium is not well recognised by health professionals or documented in medical records, the administrative dataset probably does not accurately reflect the prevalence of hospital acquired delirium in Victoria.

In 2016–17, only 6,600 cases of hospital acquired delirium were documented in the medical records of Victorian inpatients. This equates to a prevalence of 0.5 per cent. The results of the state-wide point prevalence survey are expected to be significantly higher.

The main aim of the survey was to estimate the current burden of delirium in the Victorian inpatient population. The survey was also used to collect information on:

- The prevalence of cognitive impairment
- The characteristics of patients at risk or identified as having a possible delirium
- The frequency of physical and chemical restraint use
- The frequency of adverse events associated with delirium
- The terms used by health professionals or clinicians as they describe patients with delirium or other forms of cognitive impairment.

Safer Care Victoria will publicly share the results of the state-wide point prevalence survey over the coming months. For the first time, Victoria will have baseline data about the true impact of delirium across the state, which will help inform policy and system level changes.

The information will also be valuable to health services as they undertake improvement activities aligned with Commission's Delirium Clinical Care Standard.

The state-wide point prevalence survey marks the beginning of a multidisciplinary delirium improvement project that aims to help public health services screen, prevent and manage hospital-acquired delirium in patients.

Over the next 12 months Safer Care Victoria will work with regional and rural hospitals to undertake improvement initiatives, focusing on screening, prevention and managing of delirium, as well as educating patients, carers and health professionals about delirium. Ultimately, the delirium improvement project aims to raise the awareness of delirium amongst health professionals and reduce the impact of avoidable delirium on the people in our hospitals and their families.

Find updates on Safer Care Victoria's delirium improvement project at bettersafercare.vic.gov.au.

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Supporting Organisation - The Royal Australasian College of Physicians

What is Evolve?

Part of a global movement, Evolve is an initiative led by physicians and the RACP to drive high-value, high-quality care in Australia and New Zealand. Through a rigorous peer-review process, Evolve identifies a specialty's 'Top 5' clinical practices that, in particular circumstances may be overused, provide little or no benefit, or cause unnecessary harm.

All RACP specialty societies are invited to develop their 'Top 5' list of low-value practices. The [Australian & New Zealand Society of Geriatric Medicine \(ANZSGM\)](#) is currently implementing their [recommendations](#) across specialties, health services and in clinical practice. Their Top 5 list is:

1. Do not use antipsychotics as the first choice to treat behavioural and psychological symptoms of dementia
2. Do not prescribe benzodiazepines or other sedative-hypnotics to older adults as first choice for insomnia, agitation or delirium
3. Do not use antimicrobials to treat bacteriuria in older adults where specific urinary tract symptoms are not present
4. Do not prescribe medication without conducting a drug regimen review
5. Do not use physical restraints to manage behavioural symptoms of hospitalised older adults with delirium except as a last resort

RACP encourages its Advanced Trainees and Fellows to develop and conduct research on the Evolve recommendations as part of specialty training. For further information on two demonstration projects focusing on high-risk medications, polypharmacy and de-prescribing, [click here](#).

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Events

Health Independence Programs (HIP) Cognitive, Dementia and Memory Service (CDAMS) presents Dementia, more than Cognitive Impairment: Managing the Whole Person. The event is held on **10 October 2018** at Darebin Arts & Entertainment Centre, Preston VIC. For more information, click visit www.darebinartscentre.com.au.

[Alzheimer's WA Community Services Symposium](#) – The 'We' in Dementia will be held at the Perth Convention and Exhibition Centre on **16 October 2018**. The symposium brings together service providers to participate in a dynamic event of sharing ideas and opportunities to enhance the lives of people living with dementia.

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Resources

[Health Victoria](#) provides advice on medicine use for older people in hospital.

[Medication reconciliation](#) - The Commission's website has advice on medication reconciliation. There is a [short video](#) available about the use of medicines in Australia.

[Primary Health Tasmania de-prescribing fact sheets](#) - Primary Health Tasmania website has a number of fact sheets regarding de-prescribing of different medications.

[Commonly prescribed medications in Australian residential aged care that may adversely affect cognition](#) - A set of four quick reference cards produced by Dementia Training Australia that summarise commonly prescribed medications in Australian residential aged care that may adversely affect cognition. Information includes what side effects to look out for, and circumstances that lead to increased risk of side effects, particularly altered cognition.

[Optimising medication management for responsive behaviour](#) is a resource suite consisting of a poster, quick reference cards and reminder stickers, designed by Dementia Australia to assist in the introduction, management and withdrawal of antipsychotic medication.

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