



Information Sheet for Lead Cognitive Champions

The Australian Commission on Safety and Quality in Health Care (the Commission) has launched a campaign to improve the prevention, recognition and treatment of delirium and to provide high-quality care for people with cognitive impairment in hospitals.

Your Chief Executive has signed up your hospital to the campaign and nominated you as the lead cognitive champion for the hospital.

Who can join the campaign?

The *Caring for Cognitive Impairment* campaign is a call for action to unite everyone who cares for people with cognitive impairment. Doctors, nurses, allied health professionals, health service managers, care and support staff, workers in primary health, residential or community care, patients and families can all make a difference. The campaign includes a website that lists committed hospitals and supporting organisations and tracks the number of individuals who have committed to the campaign.

Those who join become part of a community striving to make a difference. There is the opportunity to share success stories and helpful tips to address the challenges faced in implementing change. Everyone will have access to resources, webinars and regular newsletters.

What has my hospital committed to?

Committing to the campaign demonstrates a willingness to find out more about the current experience of patients with cognitive impairment in your hospital and mobilise action. Action includes screening for cognitive impairment, being alert to delirium risk, being dementia friendly, caring for people with cognitive impairment with dignity, respect and compassion and partnering with consumers.

What evidence does my hospital need to submit to the Commission?

There are no data collection, reporting or assessment requirements for the campaign. When you introduce (or have already introduced) strategies to improve the recognition and care of people with cognitive impairment we encourage you to share your hospital's experience for the campaign website's Share Your Story page.

Your Story is a brief description (about max 800 words /2 pages) about your hospital's initiatives as an opportunity for others to learn from your experience. Think about the key steps on the way, lessons learnt, what has worked and what hasn't and what would be helpful for others to know.

What is expected of me as the lead cognitive champion?

- You will be the person that the Commission contacts regarding the campaign as it progresses.
- You are also likely to be the contact person within your hospital about the campaign and the person who will oversee your hospital's commitment.
- We will be in contact to follow up on your hospital's submission for the website's Share your Story page. You can submit your story at any time during the campaign. If your hospital is just starting, the suggestions under "How do I start?" may be helpful.

cognitivecare.gov.au #BetterWayToCare



What support will the Commission provide in my role?

- This pack includes materials to assist in promoting the campaign and raising awareness of cognitive impairment as an important safety and quality issue:
 - a. Campaign infographics
 - b. USB with *On My Mind* documentary and short educational videos
 - c. Social media assets.
- The website cognitivecare.gov.au has further resource information.
- We will also be in regular touch by email. In the campaign newsletter we'll be asking for "hot topics" or questions that can be shared so don't hesitate to email through your suggestions. If you have any questions, please email cognitive.impairment@safetyandquality.gov.au

How do I start?

The following are suggestions from others who have led change in hospitals:

- Where you start depends on what is already in place in your hospital. A good starting point to review the hospital commitments and to think about what will be needed to prepare for the National Safety and Quality Health Service (NSQHS) Standards (second edition).
- Remember that there is no "right way" - how you reach the end goal will be influenced by your context and priorities.
- Spending time to work out your local issues, barriers and possible solutions by talking to colleagues and consumers can really help.
- There may be local baseline data available that you can use as a rationale for action. If not, you may consider an audit, which can also be useful for tracking progress.
- You already have executive commitment. Outlining what needs to happen in a plan for executive endorsement is a useful next step. Link to your hospital priorities.
- Getting others on board can help share the commitment. For example, you may choose to form a whole of hospital project team from the following - nursing, medical (lead and JMO), allied health, ED, Surgery, Pharmacy, support staff such as security and catering, communications, safety and quality, carer support, consumers, outside organisations important for transitions.
- Encouraging leadership across disciplines and developing cognitive champions at ward level can really help to maintain momentum. Provide regular feedback on progress.
- The [campaign website](#) can be useful to find out what others are doing. Connect with others who are making improvements and take back ideas to your group to explore whether you think they may work in your hospital.
- How to minimise distress, manage and avoid agitation and aggression are likely to be training priorities. The [campaign website](#) provides links to useful resources.
- Be positive – we can make a difference – share success.