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.

Caring for Cognitive Impairment is about creating a platform for collaboration and sharing of good practice, and I encourage all of you to share your stories.

In this issue we feature a case study that illustrates the aim of the campaign; showcase Dementia Training Study Centres a supporting organisations and their role in the campaign; and highlight an updated resource from Victoria. We also give you the details of our first webinar, and I hope that all of you will be able to participate and ask any questions you may have about the campaign.

We welcome your ideas on what you would like included in future newsletters and webinars, or what to add to the “learn more” section of the website. What are you finding challenging? Are there questions you would like to ask of others who are implementing improvements in the recognition and care of people with cognitive impairment?
Launch

The Commission’s Board Chair, Professor Villis Marshall AC, welcomed 120 people to the launch of the Caring for Cognitive Impairment campaign on 28 January 2016 at Royal Prince Alfred Hospital’s Kerry Packer auditorium in Sydney.

“We want to harness and share the great work being done around Australia to provide the best care for patients in hospital with cognitive impairment,” Professor Marshall said.

“The campaign provides a significant opportunity to share information about important and useful strategies already underway, knowledge and experience which will contribute to providing high quality care for patients with cognitive impairment.”

Participants were given a preview of the Tonic Health Media documentary, On My Mind, funded by the Commission. The documentary later screened on ABC News 24 and is available as a four-part series.

1. What is delirium and how is it different from dementia
2. Why do people with dementia and/or delirium have special needs
3. Identifying people with dementia and delirium in hospital
4. Providing the best care

Short educational videos have been made from the documentary on dementia, delirium and high quality care,
and are available on the campaign website.

The documentary preview was followed by an informative panel discussion led by ABC Radio's Dr Norman Swan. Carer Mrs Imelda Gilmore shared her husband's hospital experience from three visits, Ms Carol Bennett, Alzheimer’s Australia CEO emphasised the importance of the campaign for people with dementia. The comments from Ms Lynne Weir, Executive Director Richmond Clarence Health Service Group and General Manager Lismore Base Hospital showed that change is possible and that simple things can make a huge difference. Professor Sue Kurrle, Geriatrician and Curran Chair in Health Care of Older People in the Faculty of Medicine (Sydney Clinical School Northern) at the University of Sydney highlighted the importance of recognising delirium and treating the underlying cause.

Videos of the launch are available on the Commission’s YouTube channel.

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### A Carer’s Story: Our Dementia Rollercoaster Ride

Brett Partington has shared a story about his father, Bob. Bob, who is currently in the late stages of Alzheimer’s disease, and has previously displayed uncharacteristic aggressive and disturbing behaviour during hospital admissions. Their story highlights that making the effort to learn about a person with cognitive impairment and consulting with their family members is time well spent.

Brett says: “The value of knowing a person with dementia's background and history cannot be emphasised enough. You cannot successfully care for someone with cognitive decline unless armed with this knowledge. Calling people by their name, advocating for them, and entering their world are simple steps that can go a long way. Dignity and respect has to be a priority, and given to people at all times.”

Read more of Brett's story on the website.

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### Sharing Your Story

Anyone can submit a story for the campaign website.

Patients, carers and families play a vital role in driving change by informing us about what is important to you and what hospitals can do to make the hospital stay a safer and more positive experience.

We welcome comments, experiences or case studies from health service managers, clinicians and care and support staff in hospitals highlighting how

### Webinar

We will be holding webinars regularly during the campaign. The first webinar provides an opportunity to answer your questions about the Caring for Cognitive Impairment campaign. Why is it needed? What is its purpose? Why join? How is it linked to the National Safety and Quality Health Service Standards? I have joined, what next?

**Topic:** All about Caring for Cognitive Impairment  
**Date:** Wednesday 11 May 2016  
**Time:** 3:30pm – 4:30pm AEST
you have been able to improve the hospital experience for people with cognitive impairment. We also hope to hear from people working in primary, community and residential care about ways we can improve transitions to and from hospital.

Stories can be a simple paragraph or a more detailed story of up to a page (400 words maximum). Stories can be about the whole hospital experience or focus on a particular aspect.

The following headings are provided to help you structure your story.

- Introduction (about you, the person, the setting)
- Issues/problems faced
- Strategies that made (or could have made) a difference to your experience
- Tips for others
- Outcome

Stories can be submitted on the website. You can include a photo if you choose to do so.

Your submitted story will be reviewed and edited, key points highlighted and then sent back to you to make sure you are happy with it. With your permission, the edited version will be uploaded on the website.

If you would prefer to tell your story over the phone, email the Commission to arrange a time.

Presenters:
- Dr Suellen Allen, Program Director, Australian Commission for Safety and Quality in Health Care
- Ms Anne Cumming, Principal Advisor, Cognitive Impairment, Australian Commission for Safety and Quality in Health Care

There will be time scheduled to answer questions from participants.

Venue: Session to be broadcast across Australia

Overview of presentation:
On 28 January 2016, the Commission launched the Caring for Cognitive Impairment campaign. The aim of the campaign is to improve knowledge and care practices of cognitive impairment (such as dementia and delirium), provide better outcomes for patients and their families, hospitals and staff, and reduce the risk of harm.

The presentation will provide an overview of the campaign, the rationale, purpose, key elements and the benefits of joining.

Download flyer for this event

More information or register for this event

Supporters

There are 14 organisations currently supporting our campaign. In every newsletter we’ll showcase some of these supporting organisations and the work they are doing in support of the campaign.

Dementia Training Study Centres

The Dementia Training Study Centres (DTSCs) support the Caring for Cognitive Impairment campaign to improve knowledge and care practices, provide better outcomes and reduce the risk of harm to people with cognitive impairment in hospital.

The DTSCs aim to strengthen the capacity of the health and aged care sectors to provide appropriate evidence-based prevention and early intervention, assessment, treatment and care for people living with dementia.

There are five centres across Australia, offering a range of educational opportunities for health professionals,
including online courses, workshops, seminars, webinars, scholarships, and undergraduate and postgraduate curriculum. These opportunities support the translation of current knowledge and research into practical, effective approaches to helping people living with dementia and their families.

The DTSC website provides a wide range of evidence-based eLearning training courses and lectures, and resources relating to dementia education, which can be downloaded or ordered on the DTSC website. These online courses, as well as online videos and resources, include valuable information for people working in the acute care setting, with more near completion.

Read more about the DTSCs

## Events

The campaign’s supporting organisations are holding the following events:

### Australasian Delirium Association

- **3rd Biennial Conference:** 14 and 15 July 2016, University of New South Wales, Sydney

### Australian College of Nurse Practitioners (ACNP)

- **National Conference (incorporating NursePracED):** 30 August to 2 September 2016, Alice Springs
- **State based events:** various

### Australasian Rehabilitation Nurses’ Association

- **ARNA 26th Annual Conference:** 10 and 11 October 2016, Melbourne

### Occupational Therapy Australia

- **2016 Dementia Forum:** Forward Thinking: Innovatively Working with People with Dementia, 26 October 2016, Adelaide

## Resources

In every newsletter we’ll highlight helpful resources. This edition features the updated Victorian resource, *Older People in Hospital.*

This resource is the third edition of the *Best care for older people everywhere: The toolkit.* It has been developed in collaboration with Victorian Health Services, The Clinical Leadership Group: on care of older people in hospital, the National Ageing Research Institute, and a number of subject matter experts. It includes e-learning and audio resources, case studies and clinician fact sheets.

It has a cognition section that includes:

- Dementia
- Delirium
- Depression
- Cognitive screening
- Differential diagnosis.
Other sections are relevant to older people with cognitive impairment and include:

- Assessment, communication and person-centred care
- Continence
- Falls and mobility
- Frailty
- Medication
- Nutrition and swallowing
- Pain palliative care
- Pressure injuries.