Posters

Clinical Quality - Patient Centredness

(69) 'ARE YOU CONCERNED ABOUT ME TODAY' - AN MDT APPROACH TO IMPROVING DELIRIUM RECOGNITION

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Introduction: Delirium is a common neuropsychiatric syndrome that increases the likelihood of adverse outcomes for patients admitted to hospital. Delirium is preventable and treatable. Recognition of the syndrome is challenging. Our aim was to increase this recognition through robust inpatient screening, utilising a multi-disciplinary team (MDT) approach.

Method: Stakeholder analysis for a quality improvement project revealed that junior doctors were members of the team most likely to perform a 4AT. Plan, do, study, act

(PDSA) cycles were carried out: 1. Junior doctor engagement 2. Verbal prompts in huddle 3. Healthcare assistant (HCA) questionnaires.

Results: Baseline data showed that on average 0.6% patients had new 4AT over one week on elderly care wards. Intervention 1 involved 4AT handouts given to junior doctors. Number of 4ATs was 3% of patients per week. Intervention 2 used prompts in the morning MDT huddle, asking about concerns for patients. This increased the number of patients having 4AT per week to 6.5%. HCAs did not attend huddles and were targeted in the third intervention. A questionnaire with delirium information and the subsequent question 'are you concerned about this patient' was placed in patient bedside folders. This gave opportunity for HCAs to escalate patients to huddle so 4ATs could be carried out. The questionnaire was completed for 62% of patients, but only 1.4% patients were flagged up and subsequently had 4AT. This time was complicated however by the wards becoming Covid-19 wards.

Conclusion: Delirium is common however there is missed opportunity for earlier identification. Utilising HCAs with bedside questionnaires was time efficient and ensured robust escalation to prompt further investigation. When incorporated into huddle this could lead to more delirium diagnoses if carried out over a longer period, outside of the Covid-19 pandemic and on a ward solely populated with elderly care patients.