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# Effects of Implementing an Innovative Education Initiative for Recognition Management of Delirium in Acute Hospitals

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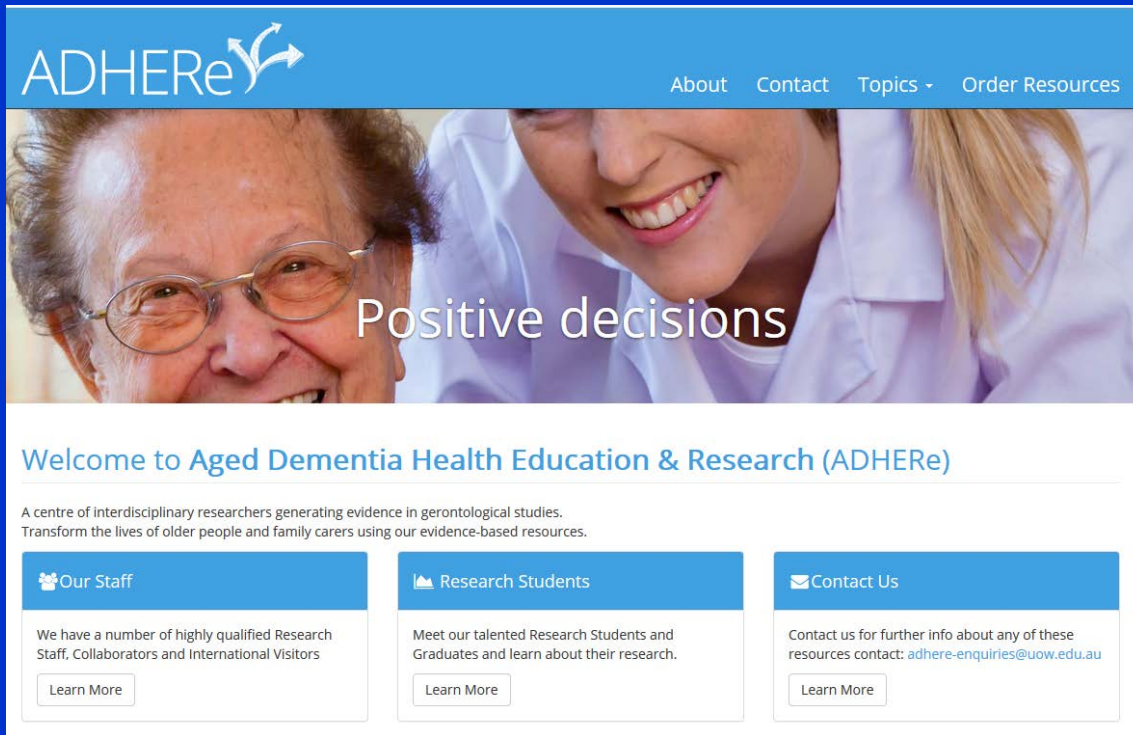
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# Who we are ...



The screenshot shows the ADHERE website homepage. At the top, the ADHERE logo is on the left, and navigation links for 'About', 'Contact', 'Topics', and 'Order Resources' are on the right. Below the navigation is a large image of an elderly woman and a young woman in a white lab coat, with the text 'Positive decisions' overlaid. Underneath the image is a white banner with the text 'Welcome to Aged Dementia Health Education & Research (ADHERE)'. Below this banner is a short paragraph: 'A centre of interdisciplinary researchers generating evidence in gerontological studies. Transform the lives of older people and family carers using our evidence-based resources.' At the bottom, there are three blue boxes: 'Our Staff' (with a group of people icon), 'Research Students' (with a graduation cap icon), and 'Contact Us' (with an envelope icon). Each box contains a brief description and a 'Learn More' button.



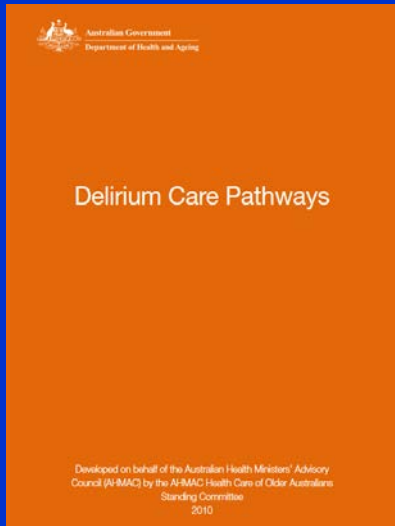
## Funding

- NSW Health
- University of Wollongong

# Delirium care research at UOW 2008 .....

- Lothian NHS Trust, University of Edinburgh, Australian Commonwealth Government, NSW Health and UOW
  - Delirium Care Pathways
  - ‘Delirium Care Flip Chart’ and ‘Delirium Care Patient Journey’ Filmed Vignettes
  - Detecting delirium in emergency departments
  - Recognition and identification of delirium by RNs
  - Role of anaesthetics in delirium
  - OSCEs as innovative delirium care education

# Outputs from our collaborations



# Research aim and objectives

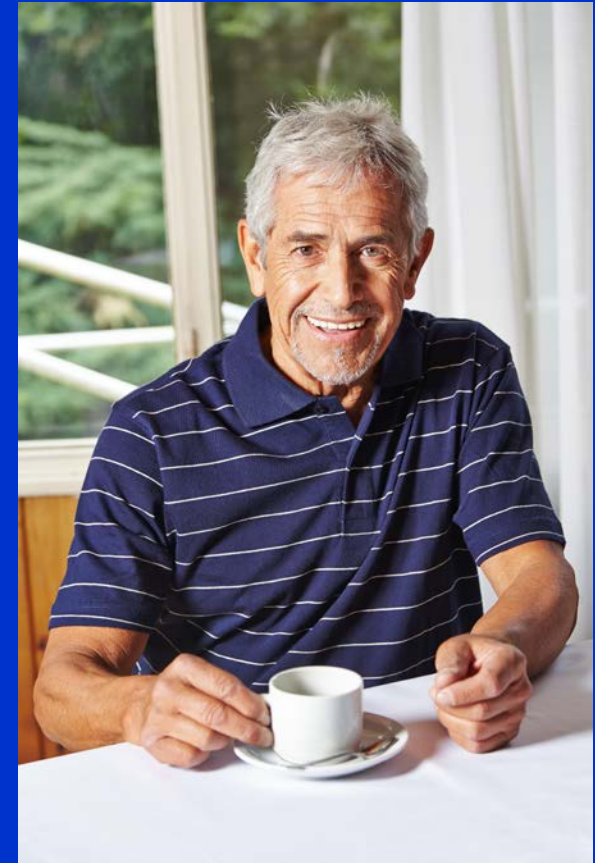
- Evaluate the implementation of a multi-modal education intervention on delirium care in acute care hospitals
  - Pre and post test surveys (baseline, immediately post and six-weeks post)
  - Observations of practice
  - Reflective accounts





# Multi-modal education

- Face-to-face session using the ‘Delirium Care Flip Chart’
- Online delirium care module
- Reflective activity reviewing documentation
- Delirium care Objective Structured Clinical Examinations (OSCEs)



# Sample and setting

- Aged care wards
  - Regional sub-acute hospital
  - Urban acute care hospital
- Facilitators
  - Senior RNs (nurse practitioner, clinical nurse consultants and clinical nurse educators)
- Learners
  - RNs, ENs, allied health and medics
- Role play actors for OSCEs
  - Assistants in nursing



# How were the OSCEs undertaken?





# The logistics

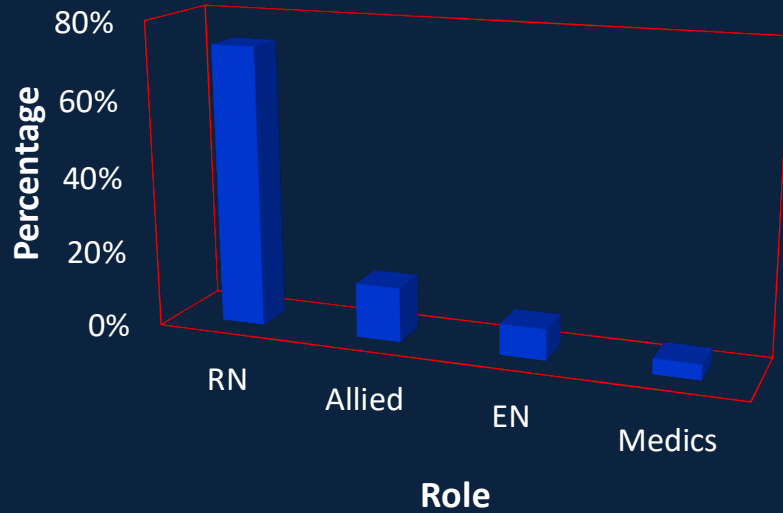
- Launch event crucial with media attention
- Integration of intervention into existing educational calendar schedule and delivered within usual staffing profile
- All staff involved, including AINs in the role playing activities
- Focus was on ensuring education intervention was engaging
- Education focused on confidence and competence in delirium care with practical aspects in OSCE



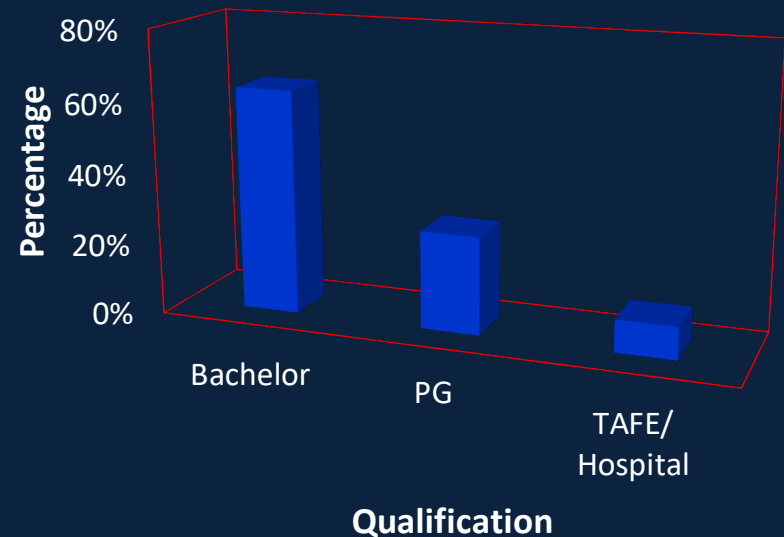
# Findings

- N=98: Learners completed the programme across two sites

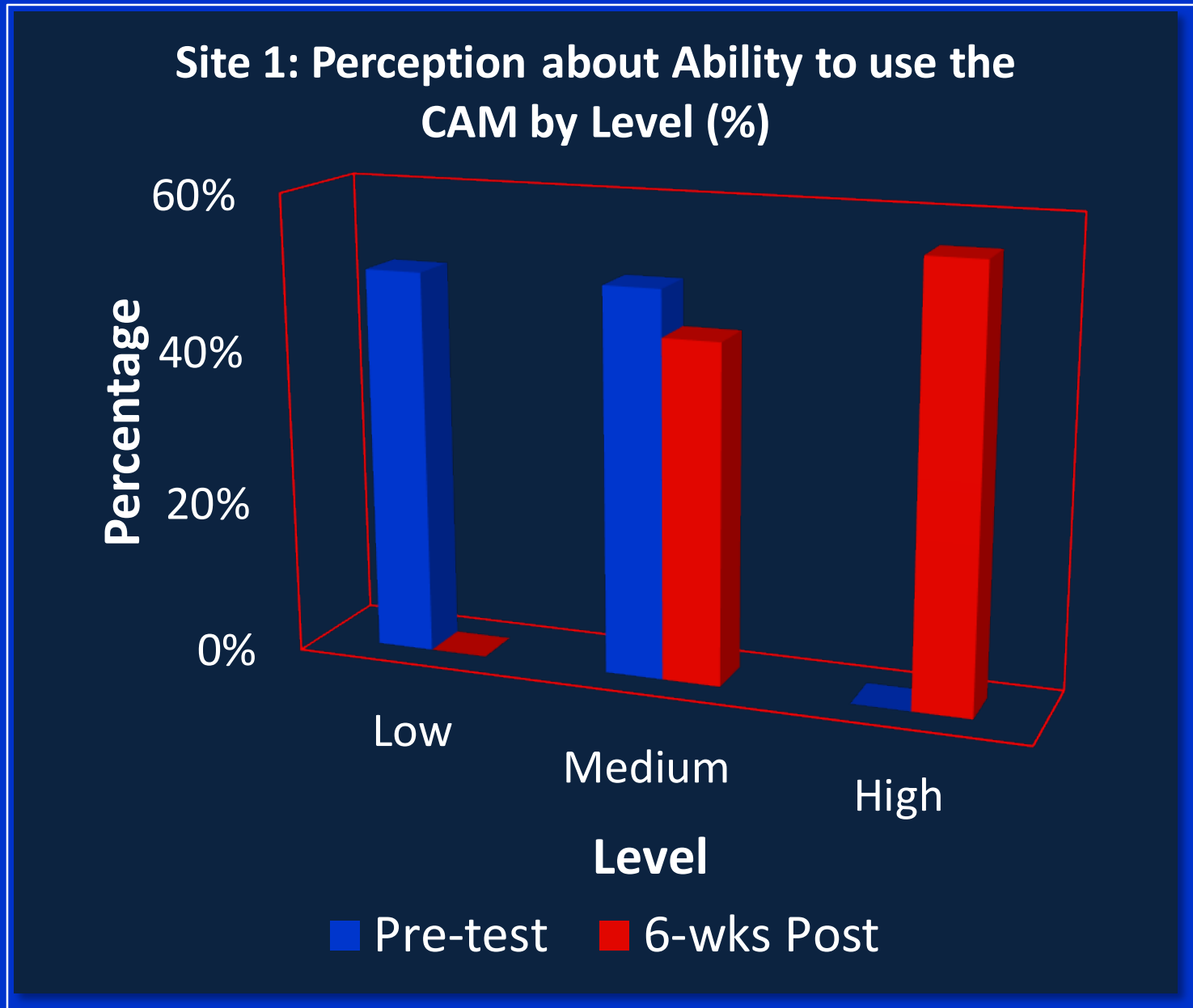
Profession by Role (%)



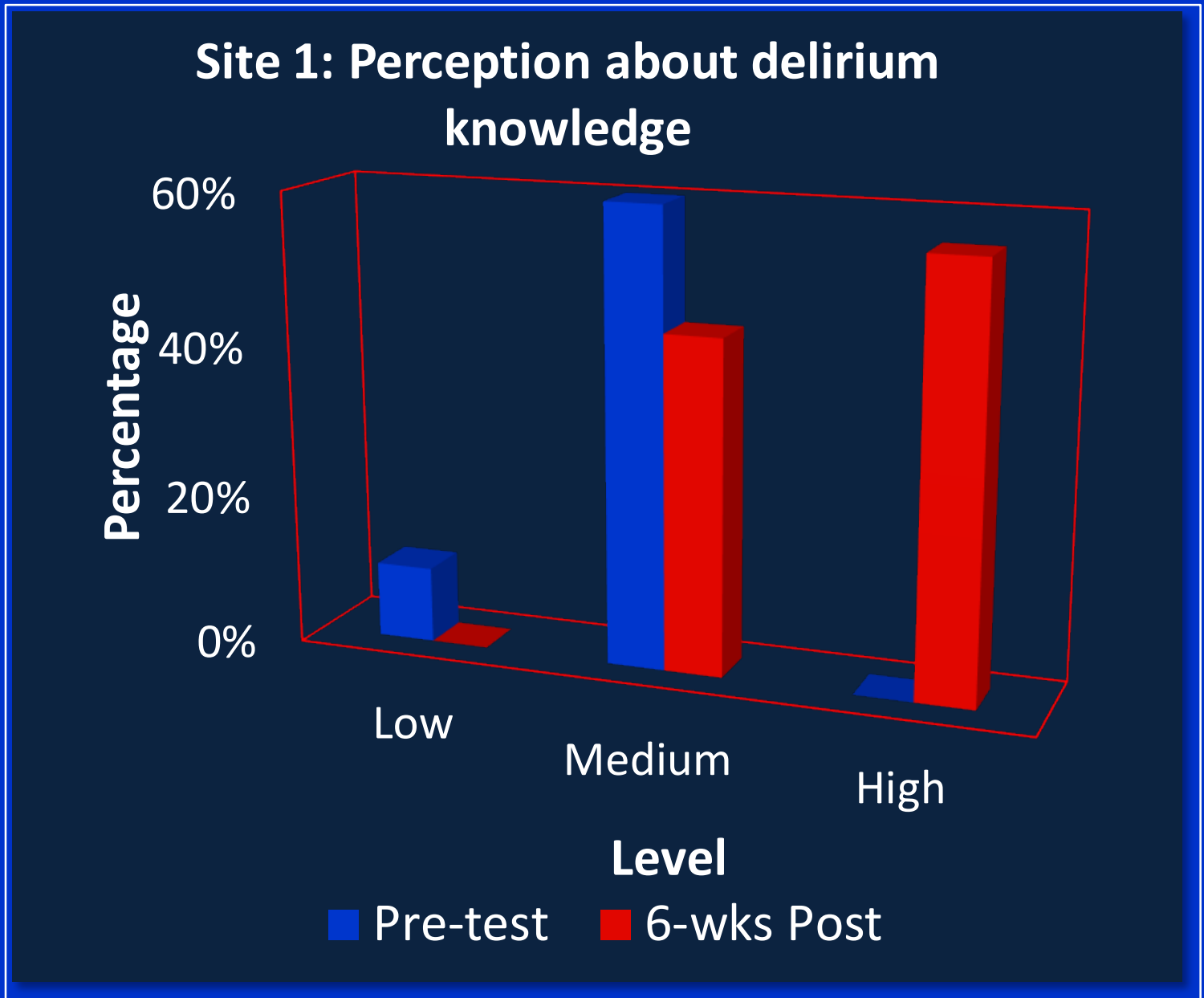
Education Level by Qualification (%)



# And what did we achieve ... ?



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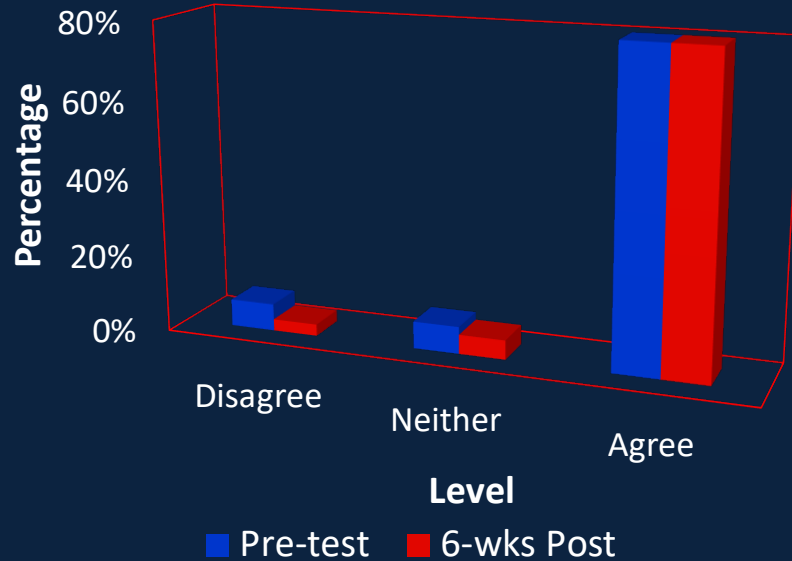


$p \leq 0.001$

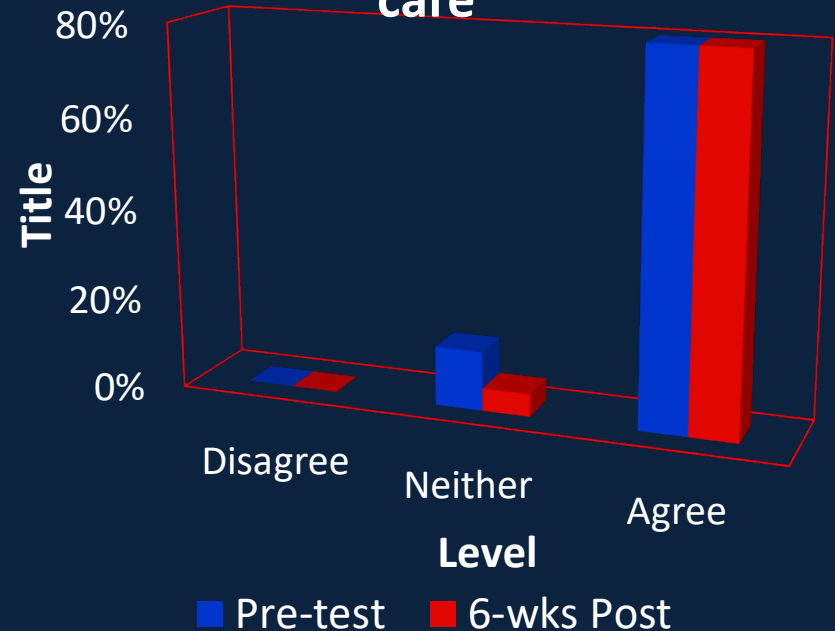


# And what did we achieve ... ?

## Site 3: Confidence to use CAM



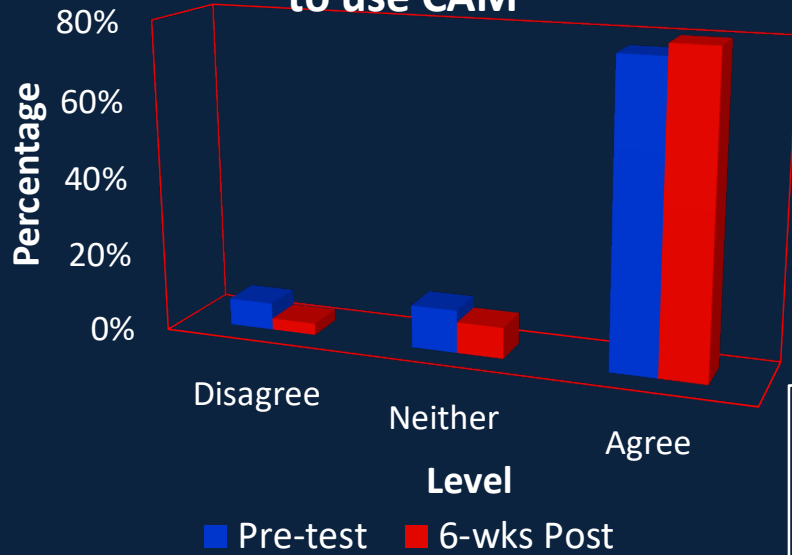
## Site 3: Confidence in delirium care



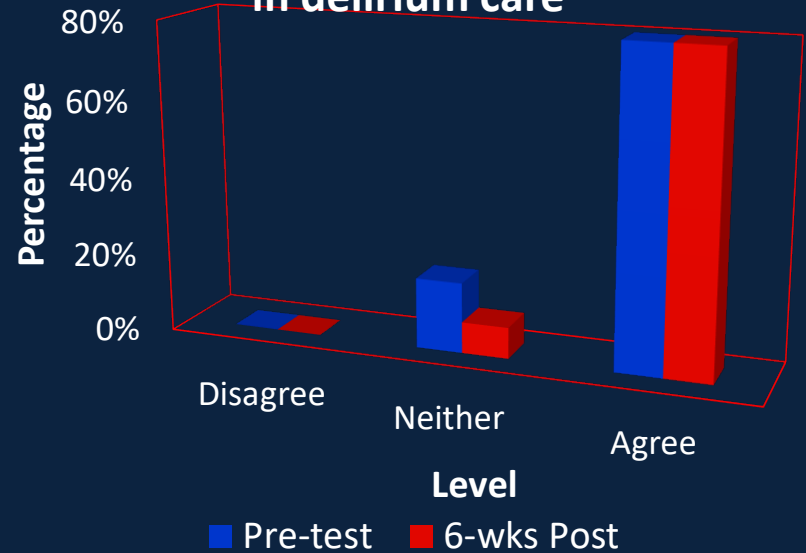
Not significant

# And what did we achieve ... ?

**Site 3: Perception about competence to use CAM**



**Site 3: Perception about competence in delirium care**



Not significant

# “Scenarios allow nurses to practice what they need to do”

“Putting into action the knowledge and skills obtained from this education session.”

“It retains much more knowledge ... we got to participate as well as use critical thinking in the normal hospital scenarios.”

“It is very practical and provides up-to-date information useful in actual practice.”

# And the facilitators ....

"The OSCE was a great way to see how the nursing staff put their delirium knowledge and clinical skills into practice."

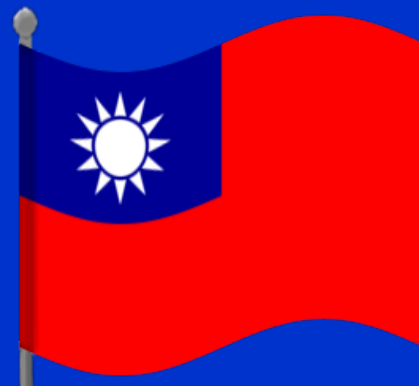
I was able to validate appropriate clinical management directly after the session to reinforce positive [delirium] management."

"Being able to offer support/ encouragement to staff when doing the face-to-face component."



# What's next? 2018-ongoing

- Extending the research to private hospital setting in Sydney
- Adding observation of practice to the evaluation outcomes
- Collaboration in Taiwan with Taipei Medical University in an intensive care unit with a RCT with usual non-OSCE education as the control
- Resources published and available on the ADHERE website ([www.adhere.org](http://www.adhere.org))



“We’re all ears”: Any questions?



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## Further Information

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