Herts and Beds Critical Care Network

Raising the profile of delirium to improve patient care

Herts and Beds Critical Care Network applied NICE guidance to improve the prevention, diagnosis and management of delirium. The network achieved this through a range of measures, such as auditing practice, educating staff and sharing practice on the use of new drug therapies.

"Having staff champion the cause of delirium was an effective way of engaging clinicians."

Emer Corbett, Service Improvement Lead, Herts and Beds Critical Care Network

NICE guidance highlights room for improvement

Delirium is a common and serious condition, affecting people in hospital or long-term care. It is characterised by changes in mental state or consciousness, which is often shown as confusion, difficulties with understanding and memory, or personality changes.

Up to 80% of patients experience at least one episode of delirium in a critical care unit. The condition is associated with higher 6-month mortality, and longer hospital stays in patients receiving mechanical ventilation.

Before the project started, Herts and Beds Critical Care Network had already taken certain measures to tackle delirium across the four acute trusts it serves. These included implementing the Richmond Agitation Sedation Scale and the Confusion Assessment Method ICU (CAM ICU), in all units to support the early recognition and treatment of delirium.

However, following the publication of NICE's clinical guideline on delirium in 2010, the network observed that more measures could be taken to improve levels of care for patients in its units.

It consequently set a plan of action to ensure care followed NICE recommendations, and for improvements to be made in the services for patients at risk of delirium.

Audit reveals areas where care can be improved

The first measure taken was to carry out a baseline audit of current practice across the four trusts the network serves, using NICE's audit tool as a template. The audit results were then analysed, and the network collaborated with the trusts to draw up local action plans. The trusts used NICE's implementation tools to formulate these plans, and set short time frames for completion.

'Delirium champions' were identified in each trust, and training was provided to staff on various topics, such as bedside teaching. The delirium champions also raised the focus of delirium on in-house teaching days.

The delirium champions encouraged daily assessment of patients with delirium, as this can lead to early recognition and treatment of the condition. The network observed that tackling the condition early on can also lead to improved patient experience, and savings within critical care due to a reduction in length of stay.

Further measures included featuring CAM ICU assessment scoring boxes on nursing team handover sheets, hosting a 'Delirium Month' and a CPD-accredited conference to maintain awareness, and sharing practice on new drug therapies.

Increased compliance with NICE guidance

The network has seen improvements in the diagnosis, management and in the documenting of patient care, with daily assessment now occurring.

Several improvements have also been seen in compliance with NICE-recommended interventions for the prevention of delirium. These include increasing compliance with NICE guidance from 80 to 100% on providing:

- appropriate lighting to address cognitive impairment and/or disorientation among patients
- appropriate noise levels to promote good sleep patterns

Challenges met included a lack of interest and some scepticism among clinicians. This was tackled through holding a delirium conference, which from delegate feedback, showed it had a positive effect on engagement.

Learning points include:

- identify delirium champions early on, and build on existing relationships to promote the cause.
- staff engagement was crucial
- education, through events such as the conference, galvanised clinicians and provided an opportunity for networking
- peer review led to better outcomes, and sharing of good practice

Contact: Emer Corbett
Service Improvement Lead
Herts and Beds Critical Care Network
Email: emer.corbett@nhs.net
Telephone: 07825102102