# Clear pathways and good communication – the key to good care

# If you are still not sure about delirium & don't know what to do:

 Read the posters, use the education box, follow the pathways

Look at your residents with fresh eyes....



# Is the patient ill or showing signs of delirium?

- o Sudden onset
- o Increased or Fluctuating confusion
- o Poor attention, rambling conversation
- o Increased lethargy or agitation



o increased lethargy or agitatio

### Investigate the cause of the delirium:

Pain - Infection - Constipation - Dehydration - Medication - Environment

## Complete a delirium checklist

• Use the delirium care pathways to treat and manage the delirium



DELIVED ATION	CONSTIPATION	URINE & CATHETER INFECTION
DEHYDRATION	CONSTIDATION	
DEITIDINATION	CONSTITATION	

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**ENVIRONMENT**Page 6-7

MEDICATION EFFECT
PAIN
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Record the care given, record all the observations, update the resident's notes

Place it in the residents notes as an accurate record of the delirium episode

#### Communicate to staff

Tell them about the delirium at the time and in handover

Use the communications book for requested tests & referrals so that the all staff on the next shift are fully aware.

### Communicate to the doctor and practice nurse

Use the checklist to describe the resident's condition accurately

#### Communicate to relatives

Your resident is very ill - the relatives should be informed-

Explain what delirium is and how it is affecting their relative

Remember to tell them when the resident is improving

There is always something a good carer can do to help a resident feel better Preventing delirium will save you time in the long run