

Assessment of the detection and prevention of delirium using 4AT and TIME bundle on an orthogeriatric ward

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Background

- ▶ Delirium is an acute, fluctuating change in mental status which commonly affects elderly patients.
- ▶ It is associated with high levels of morbidity and mortality, but is frequently under-recognised.
- ▶ 'SIGN' and 'Scottish Standards of Care for Hip fracture patients' recommends routine screening of patients over 65 or with hip fracture using the 4AT tool and if delirium is detected, TIME bundle prompts consideration of its possible causes.

Method

- ▶ 4AT and TIME bundle completion rate assessed on an orthogeriatric ward in Royal Alexandra Hospital, Paisley.
- ▶ Initial results gathered from a 27 patient cohort using a data collection tool
- ▶ Three subsequent sets of data collected in different cohorts of 30 patients following recommendations, assessing for quality improvement.

Results

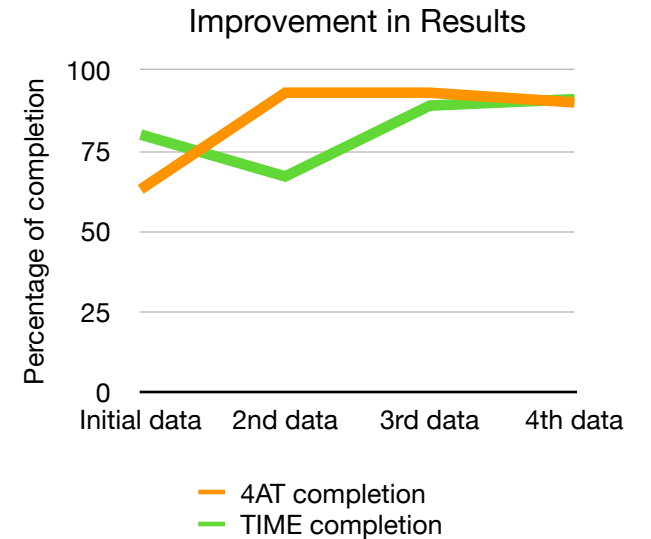
1st Data collection:

- ▶ 89% of patients had 4AT completed on admission to hospital compared to 63% on ward transfer.
- ▶ A higher rate of positive 4AT score was noted following ward transfer compared with admission (29% v 12.5% respectively), highlighting risk of delirium with increased length of stay.

Of note: Only 1/3 of patients who had a positive 4AT on admission had a 4AT completed on ward transfer.

Following continued Interventions:

- ▶ An improvement was noted in the rate of 4AT completion on ward transfer, from 63% to 93%, with evidence of sustained change in subsequent data collections (93%, 90%).
- ▶ TIME bundle completion showed an initial dip from 80% to 67%, however, following targeted interventions, this improved to 89% and 91%.



Interventions

1. Staff education at departmental meetings
2. Collection of staff feedback forms
3. Daily reminder at ward meetings
4. 4AT/TIME charts filed consistently in bedside folders
5. Reminder posters placed on ward

Conclusion

The completion rates of 4AT and TIME bundle improved following implementation of recommendations, resulting in better detection and prevention of delirium in at risk elderly patients.