Abstract

Background and Purpose: Hospital delirium, an acute confusion state that often affects older adults exposed to stressors, causes permanent harm and leaves patients below their baseline cognitive function. Nurses do not adequately recognize patient risk factors, or the signs and symptoms of hospital acquired delirium in hospitalized older adults. This quality improvement (QI) project aimed to increase nursing knowledge of recognition and management of delirium via a targeted teaching intervention using academic detailing.

Methods: This QI project used a pre- and post-test study design in a 28-bed telemetry unit in a mid-sized transplant hospital in the southern United States. All nurses working on the unit were invited to participate. Nurses completed a knowledge test before receiving a targeted teaching intervention about delirium, its symptoms, risk factors, and nursing interventions to address it. The teaching intervention was performed via academic detailing in small groups or individually at a time convenient to the nurses. The posttest was administered 30 days after implementation and an audit of delirium screenings was performed.

Results: There were 55 pre-tests and 36 post-tests returned which yielded 27 matched pairs. Nurses had better than expected baseline knowledge about delirium. There was statistically significant improvement in nurse knowledge of reasons to perform a delirium screening and nursing interventions if a patient screened positive. There was no change in the number of delirium screenings charted.

Conclusions: Hospital delirium is common, often overlooked, difficult to diagnose, costly, and can be permanently harmful to elderly patients. This project emphasizes the importance of nurses’ knowledge in the prevention and care of delirium because nurses are the most likely to notice delirium and are expertly positioned to address it.

Implications: This project showed that a focused educational intervention using academic detailing can lead to lasting knowledge gains for nurses.

Keywords: Hospital Acquired Delirium, Older Adult, Nursing Education, Academic Detailing, Confusion Assessment Method - Intensive Care Unit,