Convention ID: 253
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Cognitive Service Innovation: A Pilot Nurse-led Dementia Consultation Session
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Keywords:
Dementia
Cognitive impairment
Nurse-led
Clinic

Introduction
Statistics show that in the group of aged over 85, there are 32% of elderly suffering from cognitive impairment. In 2013, an Integrated Cognitive Assessment Clinic (ICAC) was established in United Christian Hospital which provides a one-stop service for dementia patients in Kowloon East Cluster through collaboration of an interdisciplinary team and community organizations. The roles of nurses focus on the assessment of the cognitive, functional and social aspects, providing counseling and education to patients/ caregivers on disease management and medication advice, offering phone follow up, and collaboration with community resources. With the ageing of the population, there is increasing demand for cognitive consultation. Thus, starting from 2014, nurses are involved in pre-medical consultation of new cases in ICAC.

Objectives
1. To provide comprehensive information of the patient profile to doctor in first consultation to shorten clinician assessment time and increase new case take up rate.
2. To enhance the role and competence of Geriatric nurse in cognitive service. 3. To build a team to cope with the upcoming service need.

Methodology
Phase 1: Four geriatric ward nurses (1APN and 3RNs with PRCC in Gerontology qualification) were participated in training on dementia care since 2013. Nurses underwent attachment training and education through regular journal sharing and case discussion by geriatricians. Knowledge on assessment of the cognitive, functional and social aspects on dementia were taught. Phase 2: A practical guidebook, clinical assessment summary sheet and nursing consultation template were created for consultation session. Pamphlets about drug and disease
management were prepared for carer education. Leaflets from NGOs which provide dementia service were collected for service introduction. Phase 3: One new case was chosen in each clinic session. Comprehensive assessments including cognitive, functional and social aspects were conducted by nurse. The suggested diagnosis, staging and intervention were endorsed by geriatrician. Appropriate education and follow up were also provided.

**Result**

1. From Nov. 2014-Jan 2015, totally 10 consultations were performed by nurses. All cases were endorsed by geriatricians with correct diagnoses, stagings and affected domains. Also, appropriate management and recommended referrals were made. 2. Four patients (40%) were found to have mild cognitive impairment (MCI), 4 patients (40%) were having mixed dementia, one Alzheimer’s(AD) and one vascular dementia(VaD). 3. In this ten cases, one of them were started on anti-dementia drug, 4 referred for Smartmove training while 3 for cognitive training at first encounter. 4. Two patients were referred to NGO for center-based cognitive training and 2 cases required disease education. Conclusion: Trained nurses are competent to perform consultation to cognitive impaired patients. They are specialized to offer counselling and carer education.