



## Service Priorities and Programmes Electronic Presentations

**Convention ID:** 842

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### **A 3-year review of a Delirium Program 3Es (Early detection, Early diagnosis, Early intervention) in an Acute Geriatric Ward**

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#### **Keywords:**

Delirium Program

Early detection

Early diagnosis

Early intervention

Acute Geriatric Ward

#### **Introduction**

A delirium program 3Es was implemented in a male acute geriatric ward in United Christian Hospital between August 2013 and December 2016. Delirious patients were first screened by well-trained geriatric nurses using Confusion Assessment Method (CAM) and then early interventions or preventive measures including reality orientation, minimizing use of restraints, and encouraging family involvement were initiated quickly upon diagnosed by geriatricians.

#### **Objectives**

To evaluate the efficacy of 3Es program in early diagnosis of Delirium with prompt interventions and timely returning to premorbid mental status of delirious patients

#### **Methodology**

All patients' information including both demographic and clinical data were collected and saved in a well-designed Excel program. Data was then analyzed and efficacy of the program was evaluated by Delirium working group.

The efficacy is measured by patient recruitment rate, percentage of patients diagnosed delirium, proportion of returning previous mental status and patients' relatives satisfaction.

#### **Result**

A total 308 patients with mean age of 83.1 were recruited to the 3Es program between August 2013 and December 2016. 224 (72%) of them were diagnosed delirium and prompt interventions were provided. Of these patients, 136 (61%) returned their mental status upon discharge or before transfer. Number of recruitment and conversion from delirious to premorbid status increased around 21% and 7%

respectively. Majority of patients' relatives (90%) were satisfied with the proactive approach by nursing staff on disease management

Conclusion:

The 3Es program arouses nursing and medical staff awareness on delirium, as a result, early detection and prompt diagnosis of delirium can be achieved. Thus, early interventions can be provided to both delirium patients and high-risk patient group so as to reverse delirium or to prevent deterioration.