Implementation of Educational Bundles to Improve Delirium Screening Compliance Among Hospitalized Older Adults

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Overview

Niagara Health's initiative, Implementation of Educational Bundles to Improve Delirium Screening Compliance Among Hospitalized Older Adults, focused on increasing consistent use of the Confusion Assessment Method (CAM) screening tool. Aligned with the organization's Care for Older Persons Strategy, the project formed part of broader efforts to improve delirium care and reduce hospital-acquired delirium (HAD). It aimed to strengthen staff comfort with screening, support earlier identification and management of delirium, and improve patient safety, patient experience and provider experience. The initiative was linked to the indicator measuring the percentage of hospitalized patients aged 65 and older with reported HAD. The results reported in this story demonstrate improvements in screening compliance and staff-reported comfort, rather than a measured reduction in HAD.

Key Elements of Initiative

Change Ideas Tested or Implemented

- Unit A—intensive education bundle: A one-month intervention combining huddle talks, delirium champion training, at-the-elbow screening support and a workstation-on-wheels (WOW) companion reference guide.
- Unit B—basic education bundle: A one-month intervention using an infographic posted on the unit huddle board and a WOW companion reference guide.

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- Unit C—control: No intervention; screening compliance was compared with the intervention units.

Objective of Change Ideas

- Increase delirium screening compliance among hospitalized older adults by improving nursing staff's comfort with and use of the CAM tool.
- Support earlier recognition and management of delirium and more accurate capture of its prevalence and impact.

Team Members Involved

- A multidisciplinary team representing Geriatrics, Quality and Patient Safety, Nursing, and Clinical Leadership.
- Frontline nursing staff and delirium champions supported implementation.

Target Population

- Hospitalized adults aged 65 and older on two inpatient units.
- Educational interventions were directed at nursing staff on these units.

Measurement Progress

- Monthly CAM completion rates, compared before and after implementation and with the control unit.
- Pre- and post-intervention staff surveys assessing comfort using CAM, likelihood of completing screening, and comfort communicating results.

Implementation Experience: Successes & Challenges

Results/Early Wins

- Unit A: Screening compliance increased from 4% to 40%, with compliance sustained at approximately 52% over the subsequent four months.
- Unit B: Screening compliance increased from 2% to 69%, with compliance sustained at approximately 74% over the subsequent four months.
- Unit C: Baseline compliance was 4% and remained low, at approximately 9% during the comparison period.
- Staff reporting high comfort using CAM increased from 70% to 83%.
- Staff reporting a high likelihood of completing screening increased from 74% to 91%.
- Staff reporting comfort communicating screening results increased from 66% to 79%.

Enablers of Success

- Strong leadership, an engaged multidisciplinary project team and frontline staff buy-in.
- Accessible learning opportunities and practical reference materials.
- Delirium champions who extended the project team's reach.

Challenges and Solutions

- Competing priorities affected both frontline staff and project team members.
- Accessible education supported engagement and practice change within a busy clinical environment.
- Delirium champions helped broaden support without relying solely on the project team.

Advice for Other Teams

- Both education bundles were associated with substantial, sustained improvements in screening compliance.
- The basic bundle achieved the highest sustained compliance in this project, illustrating the potential value of simple, low-resource educational strategies.

Future Steps & Sustainability

Next Steps

- Niagara Health has developed a delirium screening compliance report providing unit-level and organizational performance data.
- Monthly reports will be shared with unit managers and directors to support benchmarking and identification of improvement opportunities.
- Reporting will guide expansion of the education strategies to units with the greatest potential for improvement.

Embedding into Practice

- Hospital information system enhancements have made CAM assessments easier to find and complete.
- Changes include automated calculation of CAM results, improved visibility of documentation, nursing task prompts every 12 hours and display of CAM results within prescriber workflows.
- These changes complement the educational interventions and are expected to support sustained screening improvements.

Data

NA

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