





### **Stockport Community Delirium Pathway**

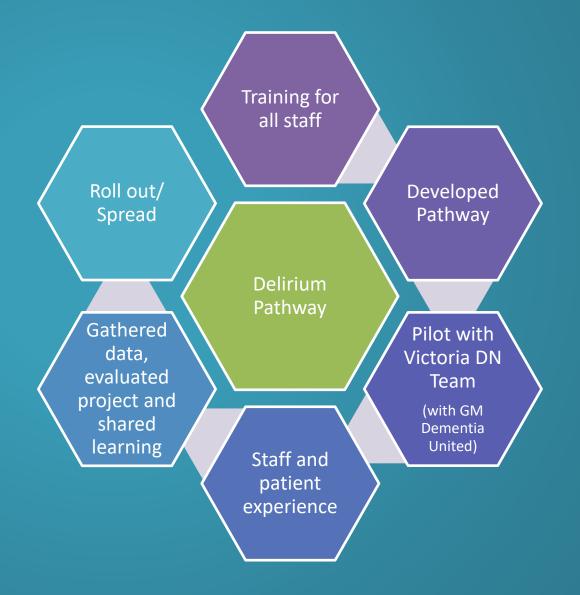
A person - centred approach to early detection, rapid assessment and successful treatment of delirium in the community



## WHAT HAVE WE DONE



proactively identify delirium (deteriorating patient) provide a rapid clinical assessment + devise a treatment plan with patient/carers remain safe at home



Stockport

**NHS Foundation Trust** 

# **The Pathway**



### **1. Primary Assessment** - Patients, suspected of delirium, receive an assessment in their

#### own home:

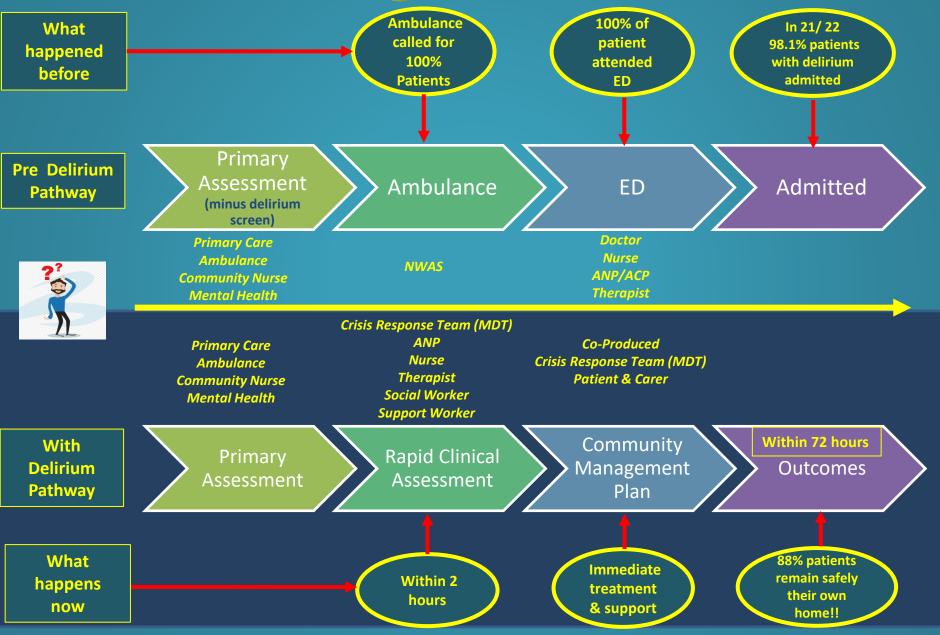
- > NEWS 2
- > Urgent bloods
- Delirium screening tool 4AT used
- Rapid Clinical Assessment carried out by CRT 98.9 % of assessments within 2 hours!
  - Establish cause of delirium (PINCHME)
  - Review of bloods
  - Functional risk assessment
- 3. Co-produced Community Management Plan The CRT assessor will treat the cause of the
  - delirium and devise a management and escalation plan with patients and carers
    - Treatment
    - Clinical Observations and ongoing review
    - MDT approach
    - Mental Health Liaison
    - Onward referrals

#### 4. Outcomes

- Patient remains at home
- Patient places in step up bed (ringfenced)
- Ambulance if required

# What's changed

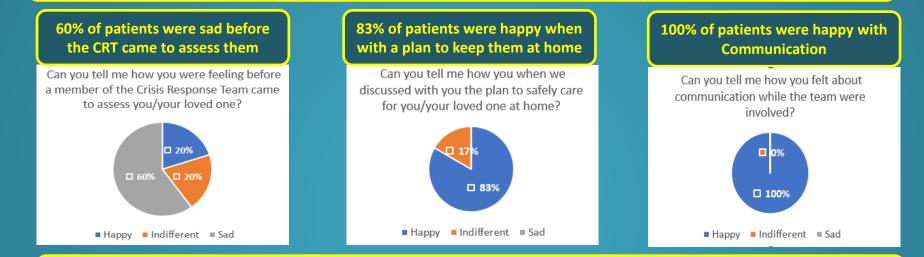




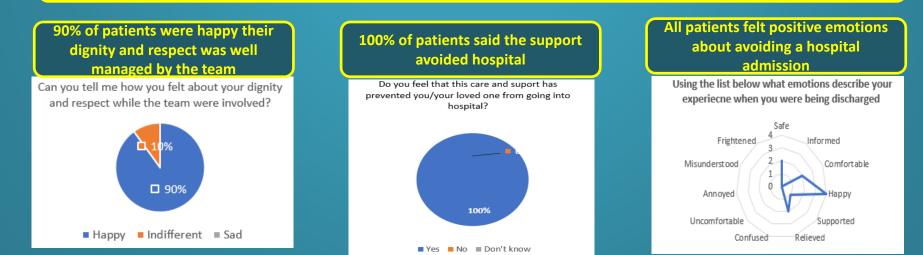
## **Feedback from Patient and Carers**



### The experience of patients and their loved ones is at the heart of what we do



#### Patient Experience Questionnaires were co-designed with Patients and Carers

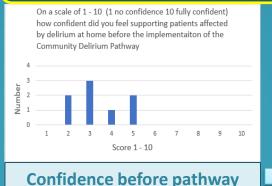


## **Feedback from Staff Using Pathway**



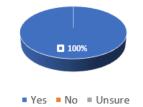


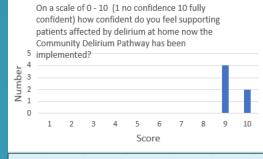
### 100& of staff using said using the pathway increased their confidence in manging patients with delirium in their own homes significantly



100% of staff said that the pathway supports keeping patients safely at home

The pathway supports keeping paitients affected by delirium safe at home





#### **Confidence with pathway**

#### 100% of staff said preventing hospital admission is the best outcome for patients with delirium and their carers

Preventing an avoidable hospital attendance is the best outcome for both the patients and their carer



# **SPREAD**



August 20 -	March 21 –	<b>Fr</b> om	From
March 21	Dec 22	March 21	June 22
PCN	Stockport	Informíng	Influencing
Level	Level	GM Practíce	National Guidance
Pilot with Stockport Neighbourhood Team	Full roll out across the Stockport Borough	Shared Pathway and learning with colleagues in GM & Dementia United GM Roll Out	And Practice Honorary Role with NICE, reviewing delirium standards & Informing guidelines

**Easy to spread – cost neutral implementation** 

## What Patients and Staff Said



