

The Prevention of Delirium system of care for older patients admitted to hospital for emergency care: the POD research programme including feasibility RCT

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Plain English summary

POD research programme including feasibility RCT

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Plain English summary

Delirium (sometimes called acute confusion) is a serious condition in which there is a sudden change in a person's mental state. It affects about one-third of older people admitted to hospital; it can be very distressing and many people do not fully recover.

A system of care called the Hospital Elder Life Program was developed in the USA to reduce delirium occurrence in older patients admitted to hospital. We wanted to see if the Hospital Elder Life Program could work in NHS hospitals.

We found that the Hospital Elder Life Program was challenging to use in the NHS because of the extra resources needed. We therefore developed the Prevention of Delirium system of care, which could be used without additional staff. Of the six wards recruited, we tested the Prevention of Delirium system of care in five: it was found to be acceptable to patients, carers, staff and volunteers in most wards, and did not make extra work for nurses. We improved the Prevention of Delirium system of care and then undertook a further study in 16 wards in eight hospitals to see if the Prevention of Delirium system of care had the potential to reduce delirium, if it was likely to be cost-effective and if a larger study would be practicable.

We were able to recruit 713 patients (the target was 720) and successfully tested 712 (99.9%) of them at least once for delirium. We managed to follow up 400 (56.1%) patients for 3 months following their recruitment to the trial. Most wards managed to use the Prevention of Delirium system of care to a reasonable extent. The Prevention of Delirium system of care reduced delirium occurrence to a similar extent as that of other studies and may represent value for money, although a larger study is needed to be sure of these findings. Overall, the findings indicate that a larger study would be practicable and would be likely to provide more accurate results to decide if the Prevention of Delirium system of care is an effective system of care for general use in the NHS.

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This report

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