Consumer Engagement and Standard 3

Presented by Kay Bruce Consumer Representative, CALHN

I have no disclosures or conflicts.

HAP!

Hospital Acquired Pneumonia

How does that happen?

Support group for long stay ICU survivors

Survive and Thrive Support Group is born



• Delirium is an issue

Now we have a brochure

What are the symptoms?

Symptoms for delirium occur suddenly, and involve changes to a person's physical and mental state. Someone with delirium may:

- > appear confused and forgetful
- > be unable to pay attention
- > act different from their usual self
- > have changes in their function i.e. mobility, ability to self-care
- > be very agitated, quiet and withdrawn, sleepy or a combination of these
- > be unsure of the time of day or location
- have changes to sleeping habits, such as staying awake at night and being drowsy during the daytime
- > feel fearful, upset, irritable, angry or sad
- > see things that are not there, but that seem very real to them
- lose control of their bladder or bowels (incontinence).

How does delirium start?

The symptoms of delirium happen very quickly, usually over hours or days. A person's behaviour can also fluctuate during the course of a single day.

Delirium is sometimes mistaken for dementia or depression, so it is important for family and friends to notify medical staff of any sudden change in a person's mental state.



The Cognitive Impairment Identifier (Cl) symbol is used to tell staff that the patient has memory and thinking difficulties, and needs special care. Use of the Cll is limited to those organisations who have entered into a formal agreement with Ballarat Health Services.

If you have any concerns or questions about delirium, talk to your local doctor or ask your hospital staff.

CONTACTS

Carers SA 1800 242 636 carers-sa.asn.au

My aged care information line 1800 500 853 myagedcare.gov.au

National Dementia Helpline 1800 100 500

Carers Australia carersaustralia.com.au Dementia Australia dementia.org.au

NSW Agency for Clinical Innovation Care of Confused Hospitalised Older Persons Program aci.health.nsw.gov.au/ chops

Ballarat Health Services – Dementia Care in Hospitals Program (CII) bhs.org.au/dchp

Adapted with permission from the NSW Agency for Clinical Innovation Delirium brochure. Sydney, 2018. Reference: ACI/D19/1464

For more information sahealth.sa.gov.au
Public - I1 - A1



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RS: 19076-1. Printed: June 2019.







This brochure provides information for people who are at risk of, or have experienced delirium, and for their families and carers.



SA Health

COVID intervenes

- In person support group meetings stop
- Survive & Thrive Newsletter is born



NEWSLETTER

ISSUE No 1

MAY 2020

Consumer Representative

- Sit on committees and working groups
- Assist prepare and edit documents
- Improvement projects
- Nurse education
- Consumer advocacy
- Adverse Incident Reviews

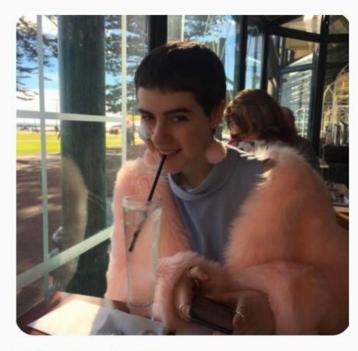
ICU Stories



Andy's story

"The effects on my wife, children and family have been difficult and I will forever be grateful for their love and support during my times of need; without that support I don't know what might have happened, as I struggled with reality at the time. A family's worth cannot be underestimated."

Read more →



Reflections by Alex

"But it was this pain that taught me that the things that tormented me most were the very things that connected me with all the people who are alive, who had ever been alive. And in realising so, I was at peace; at peace with where I had been, at peace with what I had been through, and at peace with where I was headed."





My experience in ICU at the Royal Adelaide Hospital

"It has been an enormous change for me. I used to help people in my field of work, and in my own time, and now have to accept help from others. That has been an extremely hard thing for me to accept."

Read more



Preventing & Controlling HAI (Standard 3) Priority Care Committee

Why join?

- Worried about Dad's HAP
- Hand hygiene statistics
- "Bare below the elbow" compliance

Dad's hospital stay

Good:

- Overall care fantastic
- Dedicated staff

Not so good:

- HAI
- Dysphagia
- Delirium
- Delays reinserting feeding tube
- Speech Pathologist's unreasonable request
- Anti-depressant suggested
- Lack of physiotherapy

Q) How do we set up a pool of consumer representatives?

A) You have to ACTIVELY recruit.

- Consumers often want to give back
- Keen to be involved
- "Would you be interested in becoming a consumer representative?"
- Nurses are great recruiters
- Consumers who take interest in and ask questions about care

Q) Should consumer representatives be employed full-time on salary?

A) NO!!

The value of consumer representatives is that we are not part of "the system".

We are not thinking about remuneration when we do this work.

We do it because we have a passion for it.

What do consumers offer?

- A different perspective
- We tell it like it is
- Lived experience
- Highly motivated
- Not looking for scapegoats
- Looking to improve practices

As a consumer representative, I am privileged to see the incredible dedication of so many hospital staff, the care they show for consumers and the many quality improvement projects being undertaken in the quest to improve outcomes for consumers.

This stuff makes my heart sing!

MY MESSAGE to everyone working in health care

As consumers, we're in your hands.

Please make sure those hands are safe.