

In Cardiac Surgical Patients, Will the Use of Multi-Modal Education about Delirium and the CAM Assessment Increase the Compliance of the CAM Assessment Tool Among Nurses on Pavilion 6 Cardiac



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Background

- Delirium is an acute decline in person's cognitive ability, fluctuation in one's level of consciousness, or change in attentiveness
- There is a prevalence of delirium in about 17-73% cardiac surgical patients, at which a staggering 84% can go undiagnosed and untreated.
- Using best practices tools, such as the Confusion Assessment Method (CAM), delirium can be identified correctly about 90% of the time, allowing for quick intervention.
- By educating healthcare providers about delirium and how to correctly identify this occurrence in cardiac surgical patients, early detection can occur.
 Thus decreasing mortality rates and length of stay.

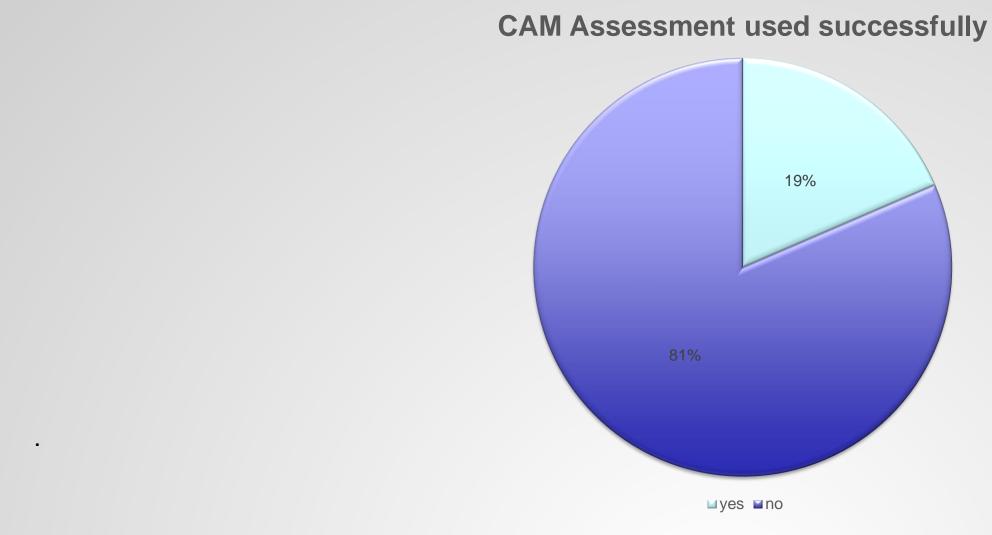
Practice Change

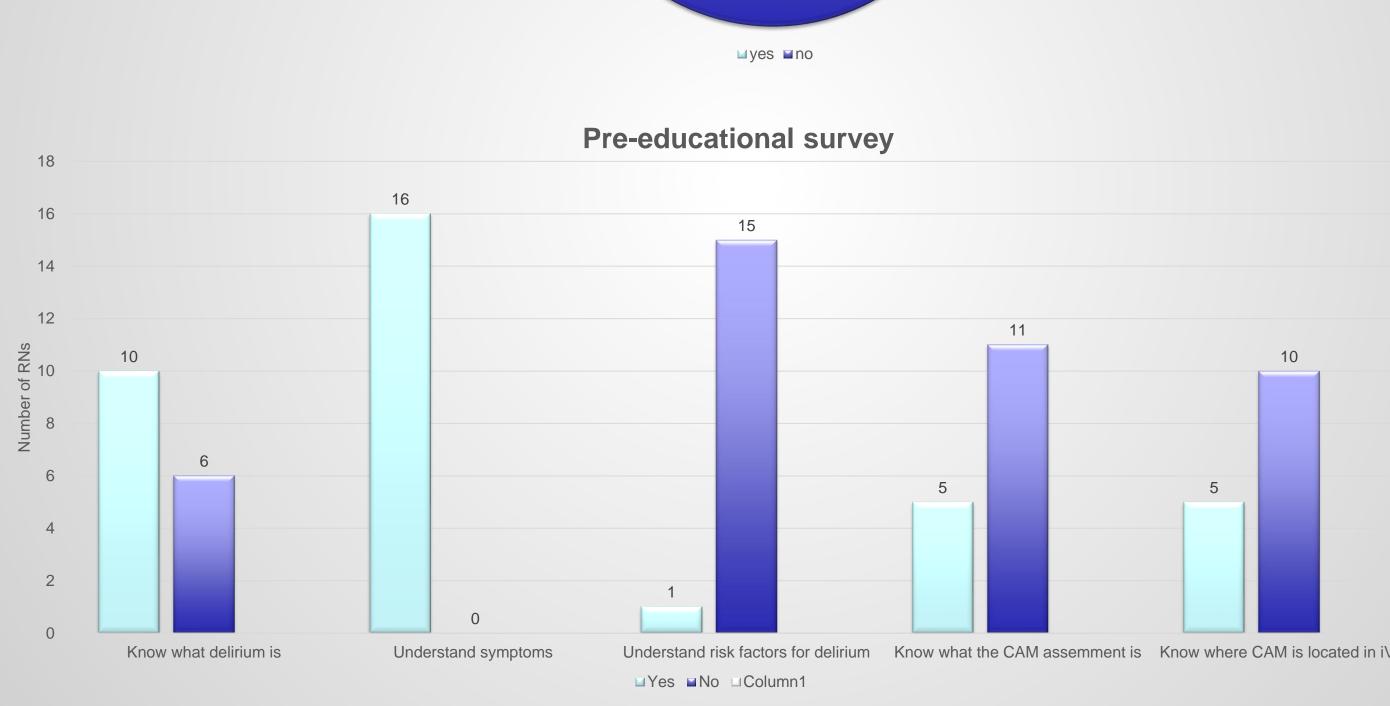
Increase registered nurse's (RN's) knowledge of the Delirium and using the CAM assessment in Cardiac Surgical patients along with increasing compliancy with using the CAM assessment for Cardiac Surgical patient.

Methods

- Administered anonymous paper pre-educational surveys to RNs.
- Presented educational content to RNs during staff huddles and a two week period for educational flyers.
- During the two weeks of education, chart audit were performed to assess the use of the CAM assessment.
- Anonymous post-educational surveys were administered directly after the educational session.

Measures and Results





Post Educational Survey 12 10 9 9 4 2 11 10 Know what delirium is Understand side effects of delirium Understand risk factors of delirium Know what CAM assessment is Think CAM would be useful to Cardiac nurses

Summary/Discussion

Summary:

- This project was conducted to identify if multimodal educational tools will increase compliance of the use of the CAM Assessment among cardiac surgical patients. This was an evidence-based practice (EBP) project. This project is not an activity designed to develop or contribute to generalizable knowledge. This activity was not a systematic investigation, including research development, testing and evaluation.
- First we needed to assess compliance and, knowledge of the CAM Assessment by RN staff on Pavilion 6 Cardiac before and after education. We then needed to assess if our education increased RN compliance with the use of CAM within the charting system by conducting chart audits during our educational period.

Some challenges we faced:

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- Having the educational blurb about delirium and CAM stay in huddle for the full two weeks; as well as reminders to fill out surveys.
- Staffing issues thus decreasing RNs time to add an addition assessment to their daily routine.
- Receiving very little surveys back in accordance to the amount of RNs working on the floor.

Conclusion

- Delirium rates in Cardiac Surgical patients at EMMC can be lowered with more adequate education on the effects of delirium on cardiac patient and how the CAM assessment can effectively identify and help treat delirium early.
- With the education the was provided during a brief 2 week period there was a noted increase in compliance in use of CAM assessment of 19 %.
- RN's on P6, during post educational surveys, expressed how the use of CAM assessment in these patient would ultimately be beneficial.

References

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