

Delirium

Delirium is a condition where the resident's behaviour and/or thinking becomes disorganised for different periods throughout the day. At times the resident may appear to be their usual self and at other times may be less able to focus or move their attention from one thing to another and they may appear anxious, frightened or very quiet and withdrawn. Delirium is often caused by a combination of factors that might include dehydration, medication side-effects, uncontrolled pain, infections, and/or the dying process.

Key messages

- Delirium is very common in residents towards the end of their lives.
- It may not be noticed or may be misdiagnosed, especially at the end of life.
- Delirium often develops over a short period of time and usually fluctuates over the day.
- It can be very distressing for the resident, family and the aged care team.

What can you do?

There are several things careworkers can do to help with the resident's delirium. The 'see, say, do, write and review' model is a useful guide that may help you.

'See': recognise and assess

- Notice changes in the resident's behaviour.
- Try to identify what might have caused those changes.

'Say': report your assessment

- Always report any new or worsening changes of thought or behaviour to the nursing staff. Be as clear and detailed as possible.

'Do': manage

- Make changes that could help to improve the delirium and reduce the risk of injury to the resident – e.g. appropriate lighting, minimise noise especially at night, ensure the resident can see personal and familiar objects, and reassure the resident.
- Talk with the family and ask if they would like to talk with a nurse about anything that is worrying them.

'Write': document your actions

- Write detailed notes in the resident's assessment chart/clinical record, if that is part of your role in your facility.

'Review': evaluate and reassess as necessary

- Review your actions. Did they help? If 'yes', keep doing them regularly. If 'no', tell the nursing staff.

Why it works

- Supports the best possible care by helping to keep the resident comfortable.

Related pages

[Clinical Care Domains](#) – clicking here will open a printable version of a flipchart that gives an introduction to delirium (see pages 79-94).

[Self-Directed Learning Package \[Careworker\]](#) – clicking here will open a printable version of the package that provides information on delirium and providing care within the careworker's scope of practice (see pages 149-151).

[Self-Directed Learning Package for Careworkers](#) – clicking here will take you to an online version of the package.

[See, Say, Do, Write and Review: Five Key Actions for Careworkers to Support Residents](#) – clicking here will take you to a video (13 minutes) that demonstrates the 'see, say, do, write and review' model.

Relevant link

Residential Aged Care Palliative Approach Toolkit – www.caresearch.com.au/PAToolkit

