



The goal of the Delirium Clinical Care Standard is to improve prevention of delirium in patients at risk and to improve the early diagnosis and treatment of patients with delirium, so as to reduce the severity and duration of delirium. Clinicians and health services can use this Clinical Care Standard to support the delivery of high quality care.

## UNDER THIS CLINICAL CARE STANDARD



A patient presenting to hospital with one or more key risk factors for delirium receives cognitive screening using a validated test. In addition, the patient and their carer are asked about any recent changes (within hours or days) in the patient's behaviour or thinking.



A patient with cognitive impairment on presentation to hospital, or who has an acute change in behaviour or cognitive function during a hospital stay, is promptly assessed for delirium by a clinician trained and competent in delirium diagnosis and in the use of a validated diagnostic tool. The patient and their carer are asked about any recent changes in the patient's behaviour or thinking. The patient's diagnosis is discussed with them and is documented.



A patient at risk of delirium is offered a set of interventions to prevent delirium and regular monitoring for changes in behaviour, cognition and physical condition.



A patient with delirium is offered a set of interventions to treat the causes of delirium, based on a comprehensive assessment.



A patient with delirium receives care based on their risk of falls and pressure injuries.



Treatment with an antipsychotic medicine is only considered if a patient with delirium is distressed and the cause of their distress cannot be addressed and non-drug strategies have failed to ease their symptoms.



Before a patient with current or resolved delirium leaves hospital, the patient and their carer are involved in the development of an individualised care plan and are provided with information about delirium. The plan is developed collaboratively with the patient's general practitioner and describes the ongoing care that the patient will require after they leave hospital. It includes a summary of any changes in medicines, strategies to help reduce the risk of delirium and prevent complications from it, and any other ongoing treatments. This plan is provided to the patient and their carer before discharge, and to their general practitioner and other ongoing clinical providers within 48 hours of discharge.

More information on the Clinical Care Standards program is available from the Australian Commission on Safety and Quality in Health Care website at [www.safetyandquality.gov.au/ccs](http://www.safetyandquality.gov.au/ccs)

The Australian Commission on Safety and Quality in Health Care has produced this Clinical Care Standard to support the delivery of appropriate care for a defined condition. The Clinical Care Standard is based on the best evidence available at the time of development. The particular circumstances of each patient should be taken into account by healthcare professionals when applying information in the Clinical Care Standard.