

Simulation Two - Scenario 1

Acute Deterioration in Cognition

Preparing undergraduate nurses for the workforce in the context of patient safety through innovative simulation

This simulation will be conducted using an approach called Tag Team Patient Safety Simulation. This is a unique approach designed to facilitate engagement of all learners in the simulation and the development of technical and non-technical skills that graduates require to be work-ready upon graduation.

Simulation Two – Acute Deterioration in Cognition

Scenario 1 Prologue

This scenario involves two nursing students caring for an older person in an extended care setting. This person is demonstrating signs and symptoms of delirium due to a urinary tract infection. The nursing students will be working with a personal care assistant, who asks the students to assist in settling the resident for the evening. The person being cared for, while mildly confused, is communicative and cooperative. The scenario provides the opportunity for learners to engage with the following:

- Clinical handover (given by the Director, guided by ISBAR)
- Various clinical assessments facilitating the recognition of acute deterioration
- The use of ISBAR to communicate concern, thereby responding to acute deterioration

The setting is an extended care facility. An introduction to the scenario will be given by the Director at the beginning of the scenario. This specific scenario will involve:

- The Director (played by the educator or facilitator)
- Two nursing students (Note: only role to be tagged)
- The resident (Protagonist)
- One personal care assistant (possible Antagonist)
- One Registered Nurse, 'on hand' as required
- Audience members



Simulation Session

Date:.....

Location:

Time:

Simulation Rules

- Demonstrate professional behaviours (including the use of mobile devices)
- Imagine that the simulation is real
- Participate enthusiastically
- Provide meaningful, honest and constructive feedback to your peers
- Learn from what went well during the simulation and from the mistakes
- Maintain respect and confidentiality during and after the simulation (this includes taking and sharing photos and videos)



Learning Outcomes

At the completion of Scenario 1, learners will be able to:

- Accurately assess, interpret and respond to individual patient data in a systematic and timely way
- Apply relevant screening processes to identify cognitive, behavioural, mental and physical conditions, issues and risks of harm and the circumstances that may compound these risks
- Collaborate and communicate effectively with other members of the healthcare team
- Reduce the risk of patients acquiring preventable healthcare-associated infections

This scenario focuses on the NSQHS Standard:



Recognising and responding to acute deterioration



Comprehensive care

Required readings for students to access before Scenario 1

Australian Commission on Safety and Quality in Health Care (2015). Safety and quality pathway for patients with cognitive impairment (delirium and dementia) in hospital. <https://www.safetyandquality.gov.au/wp-content/uploads/2015/06/Better-Way-To-care-Pathway-Poster.pdf>

Australian Commission on Safety and Quality in Health Care (2016). *Safe and high-quality care for patients with cognitive impairment*. <https://www.safetyandquality.gov.au/our-work/cognitive-impairment/>

Australian Health Ministers' Advisory Council of Older Australians Standing Committee (2011). *Delirium care pathways*. [https://www.health.gov.au/internet/main/publishing.nsf/Content/FA0452A24AED6A91CA257BF0001C976C/\\$File/D0537%281009%29%20Delirium_combined%20SCREEN.pdf](https://www.health.gov.au/internet/main/publishing.nsf/Content/FA0452A24AED6A91CA257BF0001C976C/$File/D0537%281009%29%20Delirium_combined%20SCREEN.pdf)

Queensland University of Technology (2013). The Confusion Assessment Method (CAM) diagnostic algorithm. <http://www.delirium.health.qut.edu.au/identification-and-management/confusion-assessment-method/>

Recommended resources

Australian Commission on Safety and Quality in Health Care (2014). 'A better way to care.' *Safe and high-quality care for patients with cognitive impairment (dementia and delirium) in hospital. Actions for clinicians*. <https://www.safetyandquality.gov.au/our-work/cognitive-impairment/>

Australian Commission on Safety and Quality in Health Care (2017). *Safe and high-quality care for patients with cognitive impairment*. <https://www.safetyandquality.gov.au/our-work/cognitive-impairment/>

University of Western Sydney School of Nursing & Midwifery (2009). *Agitation decision-making framework for nurses and care staff caring for people with advanced dementia: Guidelines*. http://www.uws.edu.au/_data/assets/pdf_file/0007/76237/Agitation_Guidelines.pdf

Inouye, S., Van Dyck, C., Alessi, C., Balkin, S., Siegel, A., & Horwitz, R. (1990). Clarifying confusion: The confusion assessment method. A new method for detection of delirium. *Annals of Internal Medicine*, 113, 941–948.

Peisah, C. & Skadzien, E. (2014). *The use of restraints and psychotropic medications in people with dementia. A report for Alzheimer's Australia*. Paper 38. <https://fightdementia.org.au/files/NATIONAL/documents/Alzheimers-Australia-Numbered-Publication-38.pdf>