

# CLOSE OBSERVATION PROJECT

## MEDICAL WARD - WHANGANUI HOSPITAL



### WHAT HAVE WE BEEN DOING?

- Working under the umbrella of Whanganui Rising to the Challenge.
- Identifying knowledge, compassion and communication as key areas.
- Involvement from health care assistants (HCA).
- Developed a work booklet with education module.
- Study day for HCAs –increasing knowledge and skills when providing close observation.
- Provided access to therapeutic and diversional tools to enhance care for patients with cognitive impairment.

### STAFF VOICE

"It was long, boring and stressful before, extremely stressful. We had no resources, nothing. Magazines was about it (if we could find them) and they were out of date."

"Now it's just wonderful, you just feel so happy because you can see that they're more comfortable, happier and they're thinking about something else. I tried for three days to get one patient to interact, (he was not very sociable), but today I found what triggered his connection which was really cool. He was painting with water, making a steam train and said to me 'look at that' and I said 'you've made a masterpiece.' So he's been a little bit more chatty."

As clinical nurse manager I've really noticed changes in the healthcare assistants and staff in general, purposely engaging with these patients and making sure what they're doing with them and talking to them about what is relevant to the patient. People are no longer looking at patients and seeing an old man/woman in a bed, they're seeing every single person has a story and some of them are fabulous stories. So it's more personalised and real, authentic, person-centred care which is heart-warming."

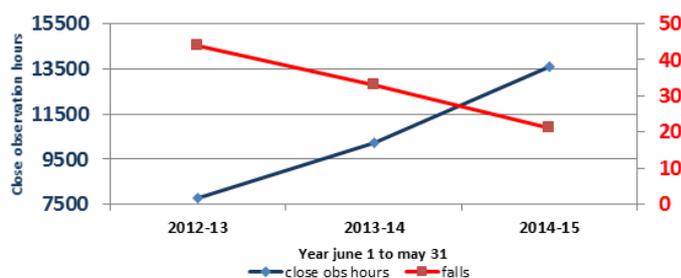
### FUTURE PLANNING

- Build upon the changes initiated from staff training.
- Optimise the ward environment to improve orientation and preserve functioning for patients with cognitive impairment.
- Introduce the pilot project to other areas of the hospital.
- Provide education for registered nurses on dementia and delirium.
- Introduce a "quick glance" assessment tool which can be used throughout the organisation to assess delirium.
- Link to rest home providers so common language can be used for admissions and discharges to assist with continuum of care.

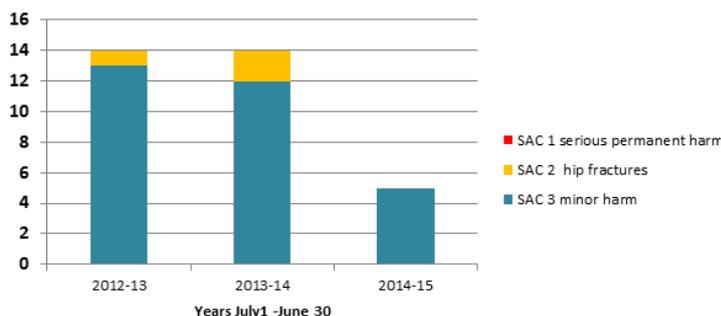
### MEASURES OF IMPROVEMENT

- Decrease in falls related to patient harm.
- Decrease in patient agitation that could lead to aggression.
- Patient engagement in activities provided which have led to patient's becoming a known individual.
- Personalised care, 'moments of care connection'.
- HCA's driven project with ownership and sense of purpose in providing patient care.
- Reduction in stress for staff working in a close observation environment.
- Professional and personal development of staff with improvements in staff morale.
- Inclusive approach to the involvement of families with positive family feedback.
- Reduced need for anti-psychotic medication.
- Enhanced ability for patients to continue activities of daily living, increasing the chance of returning home following an acute episode of care.
- Unexpected benefit to the RN in expanding the care and compassion provided to the patient through communication and connecting.
- Unexpected positive public feedback and story telling of their own experience of relatives with confusion/dementia.

Medical ward close observation hours compared to all falls



Medical ward falls with injury



### CONCLUSION

The goal of this pilot is to promote best practice by developing an environment that is responsive to the needs of the patient with cognitive impairment. This is underpinned by a commitment to ongoing staff education to improve knowledge and confidence to deliver safe and high-quality care tailored to the patient's needs.