
Cognitive Impairment Screening Toolkit

Initiative Type

Service Improvement

Status

Deliver

Added

11 February 2019

Last updated

05 February 2024

URL

<https://test.clinicalexcclence.qld.gov.au/improvement-exchange/cognitive-impairment-screening-toolkit>

Summary

Cognitive Impairment (CI) is often undetected in hospitals, with less than 20 per cent of cases properly recorded or coded. This results in poor patient outcomes, missed therapeutic opportunities, increased rates of adverse events as well as increased length of stay and costs. It also results in inaccurate data, which in turn affects hospital funding. The project will develop and roll out a toolkit to

aid the screening and identification of patients with existing cognitive impairment and those at risk of developing delirium when entering a HHS. The toolkit aims to include resources that detail what cognitive screening tools are suitable for use in Queensland Health facilities, information for clinicians on where they are available, how to use them, when to use them, how to report on the results and what to do with the results. The project will also provide a guide and promote proper documentation of cognitive screening and resources to help HHSs understand what is required to meet the accreditation standard.

Key dates

Apr 2018

Oct 2018

Implementation sites

Statewide across HHSs via QHEPS

Partnerships

Statewide Dementia Clinical Network

Key Contacts

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Aim

The aim of the toolkit is to provide clinicians in Queensland Health facilities with the tools needed to support them in engaging in routine screening for cognitive impairment.

Benefits

- Provides clinicians with resources needed to complete routine cognitive screening and appropriate interpretation and recording of cognitive screening data in their relevant work area in Queensland Health.
- Improved data recording of cognitive impairment and improved data recording will lead to increased activity based funding for patients with cognitive impairment.
- Assists Hospital and Health Services (HHSs) in meeting the accreditation standards.
- Early recognition of cognitive impairment through the use of the toolkit resources will allow prevention of further complications of care and improve treatment and management of patients with cognitive impairment who are at a significantly increased risk of adverse outcomes and preventable complications (A better way to care).

Background

The projection for the number of Queenslanders with dementia is 73,470 by 2020 (Dementia Across Australia 2011-2050, 2011). Of this number, approximately 68,000 will be aged 65 or older. People aged 65 and older make up 15 per cent of Australia's population but account for 41 per cent of hospitalisations and 48 per cent of patient days (AIHW, 2017). Hospitals will soon be required to provide evidence that they are screening for CI as part of their accreditation through the National Safety and Quality Health Service (NSQHS) Standards. The NSQHS Standards (2nd edition) were launched in November 2017, with assessment to commence from January 2019. Queensland Health data demonstrates a shortcoming in the identification of patients with CI when compared to prevalence data. This project aims to assist Queensland HHSs to improve their screening for CI, which will improve the quality of care for affected patients, and in turn help hospitals to meet accreditation standards. Improved documentation of cognitive impairment will assist with quality and safety activities, epidemiological data collection and funding for this group of patients. This project aims to address the above by:

1. Innovate for service improvement: improve tools available for clinicians in acute facilities to support them in introducing a change in practice to routine screening for cognitive impairment.

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2. Embed evidence based practice: the aim to embed routine cognitive screening into practice for patients over 65 years of (45 for Aboriginal and Torres Strait Islander [ASTI] populations).
 3. Set and monitor clinical standards: this project aims to assist facilities in meeting the proposed version 2 of the ACQSHC accreditation standards.
 4. Improve patient outcomes of care: this project aims to improve the detection and recording of patients with cognitive impairment and this in turn will assist in identification and treatment of patients who are at high risk of adverse preventable outcomes.

Solutions Implemented

The toolkit went live across the state on 11 February 2018. More information is available from the [Queensland Dementia, Ageing and Frailty Clinical Network](#).

References

Australian Commission on Safety and Quality in Health Care (ACSQHC). Comprehensive Care standard. (Draft consultation version Action 5.29 p 270). Australian Commission on Safety and Quality in Health Care. Sydney. ACSQHC, 2017. Australian Commission on Safety and Quality in Health Care (ACSQHC). A better way to care: Safe and high-quality care for patients with cognitive impairment (dementia and delirium) in hospital. Sydney. ACSQHC, 2013. Australian Institute of Health and Welfare (AIHW). Australia's hospitals 2015–16 at a glance. Health services series no. 77. Cat. no. HSE 189. Canberra: AIHW, 2017. Deloitte Access Economics. Dementia Across Australia 2011-2050, a report prepared by Deloitte Access Economics for Alzheimer's Australia. Sydney: Deloitte Access Economics, 2011.

Further Reading

[About the Statewide Dementia Clinical Network \(SDCN\)](#)