



Integrating Family Caregivers- Involvement in Care Measures to Prevent Delirium in older inpatients for Orthopedic Surgery.

Poster (Scientific)

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Background: Orthopedic surgery units have a high percentage of older persons at risk of delirium. Delirium is characterized by sudden and fluctuating disturbances to cognitive functions. It is associated with cognitive and functional decline, leading to longer hospital stays and transfers to long-term care institutions and, more importantly, with high mortality. It can cause distress to family caregivers, due for example, to patient psychomotor agitation disturbances. Non-pharmacological interventions exist to prevent and manage delirium but require a sufficient dotation of healthcare professionals. With the demands for care increasing incessantly, the Swiss healthcare system is facing a shortage of nurses and a significant reduction in the length of hospital stays in acute care. These conditions mean that nurses spend less time with patients. Without serious thought about this situation and the application of innovative solutions, this could result in severe consequences for the safety and quality of care given to hospitalized older persons. Because family caregivers have amount of knowledge about the person being cared for (e.g. biography, preferences, habits, needs). it seems pertinent to think about how they could be integrated into care to older inpatients for orthopedic surgery while they are still in hospital.

Research questions: The proposed project's goal is to understand how family caregivers- involvement can be integrated in measures to prevent delirium in older inpatients in the orthopaedic surgery units of two of French-speaking Switzerland's acute care hospitals. The study attempts to answer the following questions: 1. What are family caregivers- perceptions of older inpatients with regard to the care interventions aimed at preventing delirium and their roles vis-a-vis those older persons? 2. How are family caregivers involved in the care interventions aimed at preventing delirium in older inpatients? 3. What are nurses- perceptions of the roles of the family caregivers of older inpatients and their integration in care interventions aimed at preventing delirium? 4. How do nurses integrate the family caregivers of older inpatients into care interventions aimed at preventing delirium? 5. Which contextual issues facilitate or restrict the integration of the family caregivers- involvement of older inpatients in care interventions aimed at preventing delirium? 6. What are the perceived effects of integrating the family caregivers- involvement of older inpatient in care interventions aimed at preventing delirium?

Method and material: A case study research in two regional hospitals is ongoing. Eight cases are studied, involving an older inpatient, a family caregiver and a nurse. Head nurses of the orthopedic surgery units are also interviewed. Different data, such as, sociodemographic, interviews, direct observations, documentation are collected and intra and inter case analysis will be performed.

Expected results: Knowledge about older persons, caregivers and nurses- perceptions on integration of caregivers in non-pharmacological interventions to prevent delirium and contextual facilitators or binding elements. Discussion and conclusion Will be presented at the congress (ongoing study).