

ABSTRACTS

Nursing Symposium

Knowledge of delirium improves following staff education: results of a pre/post survey

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Background/Aims: Delirium, a frequent complication of hospital admission, often remains undiagnosed. This may be related to a lack of staff knowledge about predisposing factors and other predictors of delirium. Education has improved staff knowledge and recognition of delirium; however, most of those studies have only assessed nurses' knowledge. This study aimed to measure delirium knowledge across members of a multi-disciplinary team working in two wards of The Townsville Hospital, where there is a high prevalence of patients with delirium, using a pre and post educational intervention. **Methods:** A pre-/post-survey design was used. All doctors, nurses and allied health staff who worked in the two units were asked to complete a paper questionnaire before and after the multifaceted educational intervention. **Results:** One hundred and fifty-one staff completed questionnaires. Of the 39 staff who completed questionnaires both pre- and post- the education, there were statistically significant improvements in their total overall knowledge about dementia post-education ($M=21.31$, $SD=2.58$) compared to pre-education ($M=17.75$, $SD=4.83$), $t(36)=-5.96$, $p<0.001$. The mean increase in knowledge scores was 3.56 [95% confidence interval 2.34-4.77]. The eta squared statistic (0.50) indicated a large effect size. There were also statistically significant improvements on knowledge and risk factor sub-scales, and fewer uncertain responses given following the education. **Conclusion:** The educational intervention improved overall knowledge of delirium among a multidisciplinary team. Not all respondents completed both pre and post surveys. A similar study is underway with a more structured educational intervention for nurses working in another health service.

Which dressing? Qualitative aspects of a randomised controlled trial of wound dressings

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Background/Aims: Many patients undergoing life-preserving haemodialysis are exposed to additional risks because access is via a central venous catheter (CVC). Despite a paucity of evidence, guidelines and policies dictated the use of transparent exit site wound dressings, contrary to local nurses' practice. This study aimed to explore nurses' experiences with three different types of CVC exit site dressings in the context of a randomised controlled trial (RCT). **Methods:** Seven focus groups were held with haemodialysis nurses across the Renal Service following data collection for the crossover RCT. Four key questions were explored and thematic analysis of the transcripts was undertaken. **Results:** Fifteen nurses, with varying haemodialysis experience, provided comments on the ease of applying and removing the dressings, problems encountered with the dressings, which dressings types they thought were best or worst, and the value of having a specific work practice instruction developed for the RCT. It was clear that, although no dressing type was perfect, the opaque

dressing was the best given the properties of the dressings, the patients' preferences, and the humid climate. **Conclusion:** These perspectives are congruent with the results from the RCT that the opaque dressing type is safer than the transparent dressing type for these patients. It is suggested that necessary steps are taken to incorporate these local findings in to the health service's policy to reflect current state and national guidelines.

What really matters in person centred care? Measuring the patient's experience

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Background/Aims: Improving the patient experience requires an environment that facilitates a more person-centred care approach. The aims of this study were to promote awareness of, and measure, person-centred care, using the Paediatric International Nursing Study framework and resources. **Methods:** The project was introduced in three wards in The Townsville Hospital in October 2014. The experienced nurse leading the project began by holding workshops with staff that encouraged them to reflect on their care and build their ability to make small changes in their wards. Performance data measures included feedback from patients against eight key performance areas, together with evaluation of documentation and observational studies. All data were then mapped against the Person-Centred Nursing Framework with facilitated presentation of data and identification of gaps in nursing care. **Results:** One hundred and forty-two patient/carer surveys, 62 observations of practice, and 76 chart reviews were completed. Patients in the project wards felt safe whilst under the care of their nurse (82% of the time), and felt confident in the knowledge and skills of their nurse (76%). Patients were least satisfied with the nurses' time availability (49%) and involvement in decision-making about their care (57%). **Conclusion:** The nurses now have the tools to target areas for improvement in their own clinical settings. This will transform teams to deliver person-centred care that embraces the needs of patients, families and staff. This project, the first in Australia with its application into the adult setting, will be expanded into more wards in the near future.

Robotic seals as therapeutic tools in an aged care facility: an exploratory study

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Background/Aims: A significant component of the health care regime for residents of aged care facilities is diversional therapy. Robots, including robotic seals, have been used as an alternative to therapies such as pet therapy in the promotion of health and social well-being of older people in aged care facilities. There is limited available research that evaluates the effectiveness of such therapies in these settings. This study aimed to identify, explore and describe the impact of the use of Paro robotic seals in an aged care facility by diversional therapists who employed these therapeutic tools in their work with the elderly. **Methods:** A qualitative descriptive, exploratory design was employed in this study, set in an aged care facility in a regional Australian city over a four-month period. Interviews were conducted with three diversional therapists who maintained logs of their interactions with the Paro and residents. Data were transcribed and thematically analysed. **Results:** The findings of this study present an overview of the impact of Paro robotic seals on residents from the perspective of the diversional therapists. Three major themes were identified; 'a therapeutic tool that's not for everybody'; 'every interaction is powerful' and 'keeping the momentum'. **Conclusions:** Paro is a therapeutic tool that can aid in the promotion of the wellbeing of elderly citizens. Findings reveal improvement in emotional state, reduction of challenging behaviours and improvement in social interactions of residents. The potential benefits justify the investment in Paro, with clear evidence that these tools can have a positive impact that warrants further exploration.